

**Commonwealth of Massachusetts  
 Executive Office of Public Safety and Security  
 Office of Grants and Research  
 Highway Safety Division  
 10 Park Plaza, Suite 3720  
 Boston, MA 02116  
 Tel: 617.725.3341**

**Application for Grant Funds (AGF)  
 FFY 2011 Automated License Plate Reader Grant Program  
Deadline for Applications: Noon, November 29, 2010**

**All sections must be completed to be eligible.**

<u>Name and Complete Address of Department or Municipality</u> <b>Malden Police Department</b> 200 Pleasant Street Malden, Mass. 02148			
Chief's Last Name	First	Middle Initial	
Holland	James		
E-Mail Address	Telephone	Fax	
Jholland@maldenpd.com	781-397-7171	781-397-0296	
Grant Contact Last Name	First Name	Middle Initial	Title
Gatcomb	Marc		Lieutenant
E-Mail Address	Telephone	Fax	
Mgatcomb@maldenpd.com	781-389-2559	781-397-0296	
<b>Applicant Profile</b>			
Does your department currently have any ALPR units in use? If so, how many?		1	
Number of full-time officers		100	
Number of part-time officers		0	
What is the population of your community according to the 2009 census?		56,340	
How large is your community (square miles)?		4.5	

**Problem Identification**

Category	2007	2008	2009
Number of unlicensed motorist citations	118	132	94
Number of uninsured motorist citations	25	82	40
Number of operating with a suspended license citations	101	115	60

Number of operating with a suspended license arrests	75	68	31
Number of stolen vehicles reports	161	149	147
Number of stolen vehicle arrests	8	19	7

**Proposed Programming**

**Experience-** Provide a summary of previous experience your department has with highway safety initiatives (Click It or Ticket, Massachusetts Law Enforcement Challenge, crash reporting, etc.).

The Malden Police Department has participated in numerous traffic enforcement initiatives, to include; Click it or ticket, Drunk driving over the limit, and the like. Further, The Malden Police Department completes all traffic accident reports, to include diagrams, electronically, which are also filed in the same fashion with the appropriate agencies.

**Timeline-** Provide your projected timeline for unit purchase, training, and implementation (January 2011-June 30, 2011).

The Malden Police would purchase the unit immediately upon appropriate completion of the signatories/contract. Within one month the unit would hope to be installed and training implemented. The operational unit would then be utilized in the field within the one month period. However, should there be a delay from ELSAG, the transition of appropriate use of the unit would be within two weeks after the delivery of the ALPR.

**Project Activities-** Describe your proposed deployment use (how many hours per day, per week, etc.).

The ideal goal of the ALPR is that to be used in a line car. That is, a marked police vehicle which is assigned to patrol. The police cruiser would be in use during all three eight hour shifts, ultimately providing use 24 hrs per day, seven days per week.

**Capabilities-** Describe your department's technical capabilities to implement this program.

The Malden Police Department has entered into an agreement (MOU) with NEMLEC for the transfer of information from the Criminal History Systems Board. The department would also house a server capable to store the added information from the additional ALPR. The Malden Police Department would also share information with a multi-agency database, should such a program come to fruition.

**Goals-** Identify specific, measurable, attainable, realistic and time-bound goals and objectives for this program (i.e. increase uninsured motorist violations by 20% over 2009 levels by August 2011).

The primary objective of the grant will be data-driven and focus on the detection and apprehension of traffic law violators thus ultimately decreasing traffic crashes. Special focus will be dedicated to the apprehension of suspended, revoked, and expired drivers/vehicles thus concentrating on the repeat offender. Measureable, attainable goals would be achieved by comparison rates for arrests of the above offenses from prior years and an overall decrease in the above traffic offense related crashes, and safer streets due to a decrease in vehicle crashes.

**Evaluation-** Describe your evaluation plan (for example, a pre and post data comparison for your community during the grant period with the same time period in the previous year).

Comparison rates will be measured by data of traffic related offenses compiled from years prior verses those with the use of the ALPR. These would be comparison rates from during the grant period of the ALPR use.

**Additional Information-** Provide any additional information about your current and/or proposed ALPR program you would like EOPSS to consider when evaluating your AGF response (major highways through community, commuter population).

The Malden Police Department is currently negotiating with ELSAG for the installation of numerous "stand alone" ALPRs along major thoroughfares in Malden. These cameras would be mounted on lightpoles at strategic locations within the city. These would be an excellent complement to ALPRs mounted within police vehicles. The Malden Police Department currently has one ALPR in use and a second would double coverage to be divided equally within the city.

**BUDGET TEMPLATE**

**January 2011 - June 30, 2011-** also provide specification sheet from your chosen vendor

<b>Equipment</b>	<b>Cost/Rate</b>	<b>Total</b>
MPH-900X2AD3 ALPR	16,350.00	16,350.00
Operation Center License	600.00	600.00
<b>Total</b>		

Total funding requested \$ 16,950.00

Please Note:

If your department does not have an officer safety belt policy, 50% of your total grant award will be deducted. If your department falls into this category, please provide a statement agreeing that the balance will be paid by your department or that no funds will be awarded.

Grant recipients are required to provide an in-kind (soft) match which represents 20% of the total project cost. For example if you receive \$5,000, your 20% match would be calculated as follows: \$5,000 divided by 80% = \$6,250 X 20% = \$1,250.

**FEDERAL IN-KIND MATCH REQUIREMENTS - REQUIRED**

<b>Item/Service</b>	<b>Quantity</b>	<b>Cost</b>	<b>Total</b>
Patrol Officer	160 hrs	25.00 per hr	4,000.00
Vehicle	160 hrs	8.00 per hr	1,280.00
Additional Car Kit	1	335.00	335.00
Service Plan Year 2	1	1,600.00	1,600.00
Service Plan Year 3	1	1,600.00	1,600.00

Department's plan to pay for additional maintenance and warranty costs:

The Malden Police Department will absorb the service plan for years two and three. (\$1,600.00 per years times two years). Year one is free with the purchase of the unit. (please see above soft match)

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**For EOPSS/HSD Use:**

Revised Total Request:

\$ \_\_\_\_\_

Applications due on or before November 29, 2010 at noon to:

Dan DeMille, Program Coordinator  
Executive Office of Public Safety and Security  
Office of Grants and Research  
Highway Safety Division  
10 Park Plaza, Suite 3720  
Boston, MA 02116

**CHECK LIST**

- Completed Application (original and 8 copies)
- Required Signatures
- Safety belt policy or commitment to establish one by DATE
- Contract Authorized Signatory Listing

Please note that in the event that your department or municipality is selected for an award, a Standard Contract Form and General Subrecipient Conditions will be provided for your signature at that time.

Before signing below, or obtaining signature, please be sure the entire application is complete.

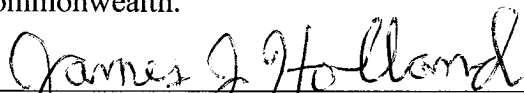
## ASSURANCES

The Malden Police Department/municipality acknowledges and agrees to comply with all grant contract requirements and performance measures. This municipality or department understands and agrees that a grant received as a result of this application is subject to the regulations governing highway safety projects and grant management requirements and will comply with all State and Federal Guidelines. Funding is based on availability of federal funds. I hereby acknowledge my understanding of the above grant requirements and will comply with the best of my ability:

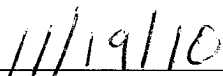
**Chief James Holland**

Authorized Representative Name and Title (please print)

Please note that the signatory must be authorized to enter into a contract with the Commonwealth.



Authorized Signature in blue ink



Date signed in blue ink

Deadline: An original application form with attachments, along with three copies, must be received by HSD by **noon on November 29, 2010**. Faxed and electronic responses will **NOT** be accepted.

\*It is suggested that departments verify with EOPSS-HSD receipt of application prior to deadline (this is because of recent mail delivery problems). Please email Dan DeMille at [Daniel.DeMille@state.ma.us](mailto:Daniel.DeMille@state.ma.us) to verify receipt.