

**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.

Name and Complete Address of Department or Municipality			
Braintree Police Department 282 Union Street Braintree, MA 02184			
Frazier	Paul	H.	
pfrazier@braintreema.gov	Telephone 781-794-8651	Fax 781-794-8698	
Grant Contact Last Name Clifford	First Name Richard	J.	Officer
E-Mail Address rclifford@braintreema.gov	Telephone 781-794-8653	Fax 781-794-8698	
Applicant Profile			
Does your department currently have any ALPR units in use? If so, how many?		0	
Number of full-time officers		72	
Number of part-time officers		0	
What is the population of your community according to the 2009 census?		33,836	
How large is your community (square miles)?		14.2	

Problem Identification

Category	2007	2008	2009
Number of unlicensed motorist citations	100	67	67
Number of uninsured motorist citations	105	65	53
Number of operating with a suspended license citations	118	116	87
Number of operating with a suspended license arrests	53	52	41

Number of stolen vehicles reports	89	74	62
Number of stolen vehicle arrests	2	0	0

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 Braintree Police Department has a long history of administering grants funded through the Governors Highway Safety Bureau and the Office of Grants and Research, Highway Safety Division. This relationship started in the early 1900's and continues to this day. During this period, we have earned a solid reputation for efficient management and clear, concise, and timely grant administration.

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

Our time line would be dependant upon delivery of equipment. After said delivery, field units would be immediately trained in its use. As soon as the technology and operation passed a check-out criteria to be developed, it would "go live". The department feels that this period would be less than a month. At present the department is working with several manufactures to obtain demonstration equipment, thus shortening this time frame.

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

It is our intention to utilize this technology continuously. While targeting areas may change the focused use, it will always be in operation. We intend to utilize this technology in real-time crime suppression, as well as post incident investigation.

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

The Braintree Police Department is fortunate to have an in-house IT department. We are provided with 24/7 technical support and a full time IT tech. These services are provided by the Braintree Electric Light Department. We are very confident of our ability to successfully implement and maintain any new technological advances that can benefit our community.

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).

Increase the number of offences brought to justice, including for serious and major crime related to use of motor vehicles

- Reduce road traffic accidents
- Make more efficient use of police resources
- Deter criminals through increased likelihood of detection
- Disrupt criminals activities and networks by intelligence led interventions
- Remove prolific and serious offenders from our streets
- Increase arrests

Increase the likelihood of positive Criminal Justice outcomes (charges / guilty pleas / convictions)

- Increase the seizure of uninsured etc vehicles
- Remove those drivers more at risk of causing problems from the roads
- Improve compliance with Road Traffic laws
- Increase visible policing
- Able to see greater police success in tackling criminality on the roads
- Increased victim satisfaction with the outcome of reported crimes
- Increase the proportion of stop / searches that lead to an arrest
- More productive police interventions
- Provide increased opportunities for early investigative lines of enquiry
- Improved use of intelligence to direct intelligence led operations

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).

The Braintree Police Department has a proven record of properly evaluating the success of initiatives funded through grants. The Chief of Police is provided with a statistical analysis of our activities on a monthly basis. This data includes the number of arrests, citations, and incident reports issued by each officer. In addition, statistical analysis is performed monthly based upon set geographic parameters. All this information is carefully reviewed and resources are allocated to address trouble areas. Therefore, we are prepared to evaluate the effectiveness of this new technology in prompt and efficient manner.

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 town of Braintree's geographic location lends itself to a high number of transient motorists. It has long been a saying in law enforcement that, "crime follows the roads". The estimate of over 50% of crimes involve vehicles, is a fair assessment in Braintree. The deployment scenario envisioned by the Braintree Police would capitalize on these facts. As Braintree is a hub for many law abiding visitors and shoppers, it is also a meet point for many criminals who transit many geopolitical boundaries around Massachusetts and beyond. The deployment of this technology in Braintree could be a serious asset to all regional law enforcement communities in the Commonwealth.

BUDGET TEMPLATE

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

Equipment	Cost/Rate	Total
ALPR	\$12000.00	\$12000.00
Total		\$12000.00

Total funding requested \$ 12000.0

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

Item/Service	Quantity	Cost	Total
Training	(6) Sessions	\$178.76	\$1072.56
Grant Adm./Reporting	(12) 1 per month	\$185.88	\$2230.56
			\$3303.12

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

The Braintree Police department will use our IT line item from our budget to pay for additional maintenance and warranty costs.

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 _____ 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:

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 to verify receipt.

ASSURANCES

The BRAINTREE POLICE 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:

Paul H. Frazer, Chief of Police
Authorized Representative Name and Title (please print)

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

[Signature]
Authorized Signature in blue ink

11/24/2010
Date signed in blue ink

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ARTICLE 14 - HEALTH AND SAFETY

A Safety Committee consisting of three (3) members of the Union, elected by and from the full membership of the Union may, if practicable, meet with the Police Chief once a month to discuss and make recommendations for the improvement of the General Health and Safety of the Members of the Department.

Officers will not be required to change tires or put chains on the vehicles except in the case of an emergency and upon the circumstance in which the Department mechanic is unable to be called in to work overtime.

To minimize the possibility of death or injury as a result of accidents involving drivers and passengers in departmental vehicles, all persons, except where specifically exempted, shall use the safety belt restraining system while operating or riding as a passenger in a departmental vehicle while the vehicle is in motion. This requirement shall not apply to persons occupying a seating position that is not equipped with a safety belt assembly or to any officer possessing a written indication from a physician or the Chief that for medical or physical reasons the officer is unable to use the safety belt system.

Unless a replacement vehicle is unavailable, no person shall operate a departmental vehicle in which any belt in the front seat is inoperable.

There are circumstances in which use of safety belt restraining systems may hamper efficient conduct of police functions. Supervisors may grant exemptions to this requirement for specific situations in which they deem that efficiency of operation outweighs the safety benefit.

Members of the bargaining unit will suffer no penalty or be held liable or lose any of their rights if they fail to engage the safety belt restraining system by mistake or inadvertence.

COMMONWEALTH OF MASSACHUSETTS
CONTRACTOR AUTHORIZED SIGNATORY LISTING

Issued May
2004



CONTRACTOR LEGAL NAME : N/A
CONTRACTOR VENDOR/CUSTOMER CODE: N/A

PROOF OF AUTHENTICATION OF SIGNATURE

This page is optional and is available for a department to authenticate contract signatures.
It is recommended that Departments obtain authentication of signature for the signatory
who submits the Contractor Authorized Listing.

This Section MUST be completed by the Contractor Authorized Signatory in presence of notary.

Signatory's full legal name (print or type): Joseph Sullivan

Title: Mayor

X *Joseph Sullivan* 3-25-09
Signature as it will appear on contract or other document (Complete only in presence of notary):

AUTHENTICATED BY NOTARY OR CORPORATE CLERK (PICK ONLY ONE) AS FOLLOWS:

I, Kathleen O'Rourke (NOTARY) as a notary public certify that I witnessed
the signature of the aforementioned signatory above and I verified the individual's identity on this date:

March 25, 2009

My commission expires on: October 13, 2011

AFFIX NOTARY SEAL

I, _____ (CORPORATE CLERK) certify that I witnessed the
signature of the aforementioned signatory above, that I verified the individual's identity and confirm the individual's authority
as an authorized signatory for the Contractor on this date:

_____, 20____.

AFFIX CORPORATE SEAL