

FY18 MOHS GRANT APPLICATION

Mississippi Office of Highway Safety

1025 North Park Drive

Ridgeland, MS 39157

Phone: (601)977-3700; Fax: (601)977-3701

mohs@dps.ms.gov

<p>1. Applicant Name: Madison County Board of Supervisors – Madison County Sheriff’s Department</p> <p>Mailing Address: 2941 Highway 51, Canton, MS. 39046</p> <p>Telephone: (601) 859-2345</p> <p>FAX: (601) 855-0770</p> <p>E-Mail: mark.sandridge@madison-co.com</p>	<p>2. Date: 11/15/2016</p> <p>3. Beginning and Ending Dates: October 1, 2017 thru September 30, 2018</p> <p>4. Subgrant Payment Method: <u> X </u> Cost Reimbursement Method</p> <p>5. DUNS # - 884388737</p> <p>6. Congressional District- 3rd</p>
7. Program Title: D.U.I. / Drug Impaired Countermeasures	
8. The following funds will be proposed for FY18 funding:	
A. COST CATEGORY	B. SOURCE OF FUNDS
(1) Personal Services-Salary	\$94,980.00
(2) Fringe: (PI&E, College & Universities, State Agencies Only)	
(3) Contractual Services	
(4) Travel	\$2,024.40
(5) Equipment	
(6) Commodities	
(7) Indirect Costs	
TOTAL	\$97,004.40
9. The applicant agrees to operate the program outlined in this application in accordance with all provisions as included herein. The following sections are attached and incorporated into this application:	
<p>Project Identification</p> <p>Travel</p> <p>Commodities</p> <p>Match Amounts (If Applicable)</p>	<p>Proposed Countermeasures</p> <p>Equipment</p> <p>Indirect Costs</p>
All policies, terms, conditions, and provisions in the application provided to applicants, are also incorporated into this agreement, and applicant agrees to fully comply herewith.	
<p>10. Approved Signature of Authorized Official (Mayor/Board of Supervisor President) for Jurisdiction to Apply:</p>	<p>MOHS USE Only:</p>
<p>Signature _____ Date _____</p>	
<p>Print Name: Trey Baxter</p> <p>Title: Board President</p>	