



MADISON COUNTY BOARD OF SUPERVISORS

125 West North Street • Post Office Box 608
Canton, Mississippi 39046
601-855-5500 • Facsimile 601-855-5759
www.madison-co.com

January 31, 2023

Mr. Stephen C. McCraney, Executive Director
Mississippi Emergency Management Agency
Attention: Mike Siler, Office of Public Assistance
P.O. Box 5644
Pearl, Mississippi 39288-5644

Dear Mr. Siler,

In response to your request for a new designated applicant agent, the Madison County Board of Supervisors will have Na'Son White to be our designated applicant agent for FEMA-4528-DR-MS. She is familiar with this project.

Should you have questions, please contact Greg Higginbotham, County Administrator, at 601-855-5502.

Sincerely,

Gerald Steen
Board President
Madison County Board of Supervisors



STATE-LOCAL DISASTER ASSISTANCE AGREEMENT

DISASTER: FEMA- 4528 -DR-MS

APPLICANT FIPS #: 089-99089-00

APPLICANT NAME: Madison County


This Agreement is between the State of Mississippi, Mississippi Emergency Management Agency (MEMA) and the undersigned State Agency, political subdivision of the State, private nonprofit organizations, or authorized tribal organizations (Applicant). This Agreement shall be effective on the date signed by the State and Applicant. It shall apply to all assistance funds provided by or through the State to the Applicant as a result of the above-referenced disaster.

The designated representative of the Applicant certifies that:

1. The representative has legal authority to apply for assistance on behalf of the Applicant.
2. The Applicant will provide all necessary financial and managerial resources to meet the terms and conditions of receiving federal and state disaster assistance.
3. The Applicant will use disaster assistance funds solely for the purpose for which these funds are provided and as approved by the Governor's Authorized Representative.
4. The Applicant is responsible for all costs determined to be ineligible or unreasonable by FEMA and/or MEMA. The Applicant is also responsible for the repayment of any de-obligations recommended by the DHS OIG and agreed upon by FEMA. Should the funds not be returned to the State in a reasonable time frame, then collection of such funds will be handed over to the State Auditor for action.
5. The Applicant is aware of and shall comply with cost-sharing requirements for Federal and State assistance. While the cost share is subject to change depending on the severity of a disaster, the minimum Federal cost share is 75 percent of the eligible costs. The normal cost share is 75% Federal and the non-federal share is split equally by the State and local. The exception is with PNPs who are responsible for the entire 25% non-federal share.
6. The Applicant is aware that limited funding, which requires cost sharing, may be made available for mitigation of future damages.
7. The Applicant will establish and maintain a proper accounting system to record revenues and expenditures of disaster assistance funds in accordance with generally accepted accounting standards and OMB Super Circulars and A-133 as applicable and/or as directed by the Governor's Authorized Representative.
8. The Applicant shall provide Quarterly Reports to the State which indicates the anticipated completion date for each project, together with any other circumstances that may affect the completion date, the scope of work, the project costs, or any other factor that may affect compliance of this Agreement.
9. The Applicant shall comply with the Single Audit Amendments of 1996 under the Code of Federal Regulations Part 200 – Super Circular: Subsection 200.501. The Applicant shall provide copies of every audit report issued on the entity at the time of its receipt by the entity to the Governor's Authorized Representative.
10. The Applicant will give state and federal agencies designated by the Governor's Authorized Representative, access to and the right to examine all records and documents related to use of disaster assistance funds.
11. The Applicant will return to the State, within thirty (30) days of such request by the Governor's Authorized Representative, any advance funds which are not supported by audit or other federal or state review of documentation maintained by the Applicant.

12. The Applicant acknowledges that it is the Applicant's responsibility to ensure all Federal, State, and local laws, regulations, rules and guidelines applicable to any FEMA grant program are adhered to. If said laws, regulations, rules and guidelines are not adhered to, responsibility for noncompliance is the Applicants.
13. The Applicant will begin and complete all items of work within the time limits established by the Governor's Authorized Representative in agreement with all applicable Federal regulations.
14. The Applicant will comply with regulations implementing the Drug-Free Workplace Act of 1988 44 CFR Part 17, Subpart F.
15. The Applicant will comply with all federal and state statutes and regulations relating to nondiscrimination.
16. The Applicant will comply with provisions of the Hatch Act limiting the political activities of public employees and 44 CFR Part 18, New Restrictions of Lobbying.
17. The Applicant will comply, as applicable, with provisions of the Davis-Bacon Act relating to labor standards.
18. The Applicant will comply with the flood insurance purchase requirements of the Flood Disaster Protection Act of 1973 which may require purchase of flood insurance.
19. The Applicant will not enter into cost-plus-percentage-of-cost contracts for completion of disaster restoration or repair work.
20. The Applicant will not enter into contracts for which payment is contingent upon receipt of state or federal disaster funds.
21. The Applicant will not enter into any contract with any party which is debarred or suspended from participation in federal assistance programs.
22. The Applicant will return all unspent federal funds for uncompleted small projects prior to requesting additional funds for other projects.
23. The Applicant authorizes the Governor's Authorized Representative to recoup the unspent funds referenced in item 22 above, by subtracting that amount from other federal funds owed to it for other approved work when the amount owed is larger than the refund.
24. The Applicant will comply with all uniform administrative requirements which are set forth in the Robert T. Stafford Disaster Relief and Emergency Assistance Act, Public Law 93-288, as amended by Public Law 100-107, and implemented by 44 CFR Part 206.
25. The Applicant shall first endeavor to settle any controversy or claim arising from or relating to this Agreement, or the breach thereof, directly with the Executive Director of MEMA, or designated representative, before exhausting any other remedies or appeals to other governing authorities.

Certifying Official (Cannot be the Applicant Agent):

NAME (Print)	SIGNATURE	DATE
Applicant Agent: Na'Son S. White		1/31/2023
NAME (Print)	SIGNATURE	DATE
MEMA Only Governor's Authorized Representative:		
Stephen C. McCraney, Executive Director		
NAME	SIGNATURE	DATE

DESIGNATION OF APPLICANT AGENT FOR PUBLIC ASSISTANCE

Federal Disaster Number: FEMA- 4528-DR-MS

Entity's Name: Madison County

Governing Body Type: County Government

Applicant Agent Information

Name: Na'Son S. White

Official Title: Comptroller

Address: P O Box 608

City/State/Zip: Canton, MS 39046

Work Phone: 601-855-5580

Cell Phone: 601-573-8029

Email Address: nason.white@madison-co.com

On behalf of the Agency listed above, the designated Applicant Agent is authorized to execute applications for the purpose of obtaining and administering certain federal financial assistance under the Disaster Relief Act of 1974 (Public Law 93.228), amended by Robert T. Stafford Disaster Relief and Emergency Assistance Act of 1988, (Public Law 100-707) and to file them with the Governor's Authorized Representative.

Certifying Official Information (Cannot be the same as the Applicant Agent):

Name: Gerald Steen

Title: President - Madison County Board of Supervisors

Date: _____

Signature: _____

A certified copy of the Board Meeting Minutes/Resolution designating the Applicant Agent is attached.

Examples of Governing Body Type are Board of Supervisors, City Council, Executive Counsel, etc.



FFATA Reporting Form

Federal Funding Accountability and Transparency Act of 2006

1. Applicant: Madison County 2. DUNS#: 884388737

3. Rostered in SAM (System of Award Management): Yes No

4. Physical Address Associated with DUNS#:
Street: 125 West North Street
City: Canton
State: MS
9-Digit ZIP Code: 39046 - _____
Country: USA

5. Is your annual gross revenue made up 80% or more in federal contracts, sub-contracts, loans, grants, sub-grants and/or cooperative agreements? Yes No

6. Do you receive \$25 million or more in annual gross revenue from federal contracts, sub-contracts, loans, grants, sub-grants and/or cooperative agreements? Yes No

7. Is salary information for all top management positions available to the public on SEC.gov? Yes No

8. Does your county sub-award any grant funds received from MEMA? Yes No

I, Na'Son S. White hereby certify to the best of my knowledge and belief that the report is true, complete, and accurate.

Name: Na'Son S. White
Agency/Organization: Madison County Board of Supervisors
Title: Comptroller
Phone: 601-855-5580
Email: nason.white@madison-co.com

For MEMA Office Use Only:

Grant Award Name _____ Grant Award ID# _____
Grant Award Amount _____ Date Obligated _____
MEMA Official Initials _____ Entered into FSRS.gov by _____ Date Entered _____