

**PENNINGTON COUNTY FIRE SERVICE BOARD (FSB)
BEST OPERATING PRACTICES (BOPs)**

ADMINISTRATIVE RULES	Date	BOP#
TRAINING REIMBURSEMENT	Addition: 1/1/2024 Revision:	FSB05

PREMISE:	The Fire Service Board (FSB) recognizes the need to help provide Pennington County fire department members with training programs for both structural and wildland firefighting courses. To support these efforts the FSB, through the County Fire Fund, will provide support to host agencies as the budget allows. It is not the intent of this program to fully fund payment for instructors, nor the cost of participants for each of these courses, but rather to offer support for those who provide knowledge, time, and guidance for others towards their growth, and the betterment of the volunteer fire department community.
PURPOSE:	The purpose of this BOP is to establish minimum support guidelines pertaining to the host agency training reimbursement guidelines.
SCOPE:	This BOP shall apply to all Pennington County fire departments who submit a Letters of Explanation, an attendance roster, and a copy of department’s Grant Program Project Agreement <u>upon completion of the course.</u>

OPERATING PRACTICE:

- 1) Each year, as funded by the Pennington County Board of Commissioners, the FSB will provide reimbursement to Pennington County fire departments that host training programs upon completion of the course as the budget allows.
- 2) Reimbursements are subject to availability and are not guaranteed for each submission, nor within a given year.
- 3) Host agencies shall not be dependent on these funds as part of their annual budget.
- 4) The Fire Administration office will process and pay host agencies within 45 days of submission. The FSB will notify each agency if there is a necessary deviation from this payment schedule.
- 5) To be considered for reimbursement, a host agency shall:
 - a) Submit a Letter of Explanation for the course they will be hosting to include course description, date(s), location(s), and participant attendance roster, including any other pertinent information. See Appendix A.

- i) This document shall be submitted to the Pennington County Fire Administration Office prior to December 1st of each year.
- b) Host agency reimbursement shall be based on the current years' budgeted amount for training. Reimbursements will be made on a "First Come, First Serve" basis and as funds allow.
- c) Funds will not be available for hosting Basic Wildland courses due to training being available for no cost to the participant or agency by South Dakota Wildland Fire.
- d) Departments applying for reimbursement shall also apply for the South Dakota Firefighter Essentials Grant. This grant helps defray costs for books, manuals and instructor fees associated with firefighter education.
 - i) A copy of the department's Grant Program Project Agreement shall be turned in with the Letter of Explanation and attendance roster. See Appendix B
 - ii) Additional information can be found at:
 - (1) <https://dps.sd.gov/resource-library/Firefighter-Essentials-Grant-Program-Form.pdf-279>;
 - (2) <https://dps.sd.gov/emergency-services/state-fire-marshal/grants>

Insert
Department
Logo

Insert Department Name
Address
Phone
Email

Insert Date

To Whom It May Concern

Re: Letter of Explanation: **Insert Course Title**

It is with great pleasure that I write this Letter of Explanation regarding the completion for **insert name of course** on behalf of **insert name of department**. The course was taught **insert date(s) course was taught** at the **insert location(s) the course was taught at**.

The course was designed to teach:

- **Insert course description here.**

Insert any other pertinent information you feel would be relevant here.

I am also including an attendance roster for the date(s) of the **insert name of course**.

Please feel free to contact me with any questions.

Sincerely,

Insert Name
Title

State Fire Marshal's Office
South Dakota Department of Public Safety
221 South Central Avenue
Pierre, South Dakota 57501-2000

**SD Firefighter Essentials Grant Program
Project Agreement**

Grantee Agency:

Project Title: **Firefighter Essentials Courses**

Address:

City:	South Dakota	Zip:
Project Director:	Email:	
Phone:	Fax:	

Project Title:

Start/ End Date:

The Grantee Agency signature below confirms acknowledgement that the Agency agrees to adhere to the terms, assurances, and conditions of herein below. The State Fire Marshal Signature indicates approval of the project outlined in this agreement.

Grantee Agency Authorized Official Signature

Date

Paul Merriman
State Fire Marshal

Date

Conditions of Award

Agreement Requirements

1. **Grantees** will provide for the Firefighter Essentials Course (Unit I, Unit II testing, and practical competencies). The course shall be open to all South Dakota firefighters.
2. **Procurement of Materials and Equipment.** Grantees will not use State equipment, supplies or facilities.
3. **Completion Date.** The Firefighter Essentials Class must be completed 12 months from the agreement start date.
4. **Reimbursement.** The State will make payment of services in the amount of \$750.00 to the grantee agency upon satisfactory completion of the Firefighter Essentials Course.
5. **Project Directors.** The Project Director, as specified on the signature page of this agreement, must be an employee of the agency or the agency's governing body.
6. **Hold Harmless.** The agency agrees to hold harmless and indemnify the State of South Dakota, its officers, agents, and employees, from and against any and all actions, suits, damages, liability or other proceedings which may arise as the result of performing services hereunder. This section does not require agency to be responsible for or defend against claims or damages arising solely from errors or omissions of the State, its officers, agents or employees.
7. **W9 Form.** A W9 form must be submitted with all grant applications. A link to a printable form may be found at: http://bfm.sd.gov/vendor/Substitute_W-9_SD.pdf
8. **Applications.** Applications may be submitted for programs or courses that started on or after September 1, 2012. Applications will be accepted on a first come first serve basis.

State of South Dakota Grant Recipient or Subrecipient Attestation

By completing this form, you, the recipient or subrecipient, attest to meeting the following requirements per SDCL 1-56-10:

1. A conflict of interest policy is enforced within the recipient's or subrecipient's organization;
2. The Internal Revenue Service Form 990 has been filed, if applicable, in compliance with federal law, and is displayed immediately after filing on the recipient's or subrecipient's website;
3. An effective internal control system is employed by the recipient's or subrecipient's organization; and
4. If applicable, the recipient or subrecipient is in compliance with the federal Single Audit Act, in compliance with § 4-11-2.1, and audits are displayed on the recipient's or subrecipient's website.

REIMBURSEMENT REQUEST FORM
SD FIREFIGHTER ESSENTIALS GRANT PROGRAM

Grantee Agency: _____

Remit Payment to: _____

Instructions: Please mail, fax or email this request form along with a written statement signed by the grantee that the course has been completed prior to the agreement end date,

I, the undersigned, do hereby declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief is in all things true and correct.

Signed: _____

Printed name: _____

Title: _____

Submit completed form to: Paul Merriman
Office of the State Fire Marshal
Department of Public Safety
221 S Central Ave.
Pierre, SD 57501
Fax: 605-773-3580
Paul.merriman@state.sd.us

