



**Mike Beebe**  
Governor

# State of Arkansas



## ARKANSAS STATE POLICE

1 State Police Plaza Drive Little Rock, Arkansas 72209-4822 www.asp.arkansas.gov

"SERVING WITH PRIDE AND DISTINCTION SINCE 1935"

**Winford E. Phillips**  
Director

### ARKANSAS STATE POLICE COMMISSION

Warren Dupwe  
Chairman  
*Jonesboro*

Dr. Charisse Childers  
Vice-Chairperson  
*Little Rock*

Dr. Lewis Shepherd  
Secretary  
*Arkadelphia*

John W. Allison  
*Conway*

Steve G. Smith  
*Little Rock*

Jane Christenson  
*Harrison*

Daniel "Woody" Futrell  
*Nashville*

### REQUEST FOR APPLICANTS

This is to notify you that the Arkansas State Police Special State Assets Forfeiture Fund Committee is accepting applications for one-time expenditures for the purposes of drug enforcement; i.e. (training, equipment, etc.) to be funded through the Special State Asset Forfeiture Fund, as authorized by Statutory Authority: Arkansas Code Annotated § ACA 5-64-505.

Attached is a summary description of this program. After reviewing this material, if you want to apply, please fill out the attached application and return it along with two copies to the Arkansas State Police, ATTN: Cathalene Purvis, 1 State Police Plaza Drive, Little Rock, Arkansas 72209-4822. All applications must be received by 4:30 P.M., August 1, 2008 to be considered for funding.

Should you have any questions or need assistance, please call Cathalene Purvis at (501) 618-8335.

Sincerely,

Colonel Winford E. Phillips  
Director

WEP/cp

Attachments



## **INTRODUCTION**

### **REQUEST FOR APPLICATION SPECIAL STATE ASSETS FORFEITURE FUND**

The Arkansas State Police Special State Assets Forfeiture Fund Workgroup is soliciting requests for applications for projects authorized by the Arkansas State Police, titled Special Assets Forfeiture Fund. Applications are for one-time expenditures for the purposes of drug enforcement; i.e. (training, equipment, etc.) and should not exceed \$30,000 per application. All funds should be spent by March 30, 2009. Any unused funds will need to be returned to the Arkansas State Police by March 30, 2009.

**Eligible Applicants:** Eligible Applicants are as follows:

- (A) Drug Task Forces
- (B) Police Departments
- (C) Sheriff's Departments

Applications must be signed by an official authorized to sign for the eligible applicant.

**Evaluation of Application:** The Arkansas State Police Special Assets Forfeiture Fund Committee (ASPSAFFC) will make an **initial** evaluation and **final** funding decisions of the grant proposals.

**Policies Affecting Funding:** The ASPSAFFC will not give consideration to applications that are not consistent with its funding plan and allocation. The ASPSAFFC also reserves the right to reduce funding, terminate funding, or impose sanctions on a grantee that does not adhere to the agreement and/or special conditions if applicable.



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### ARKANSAS STATE POLICE SPECIAL STATE ASSETS FORFEITURE FUND

The grant program is open to Arkansas Drug Task Force Agencies, Police Departments, and Sheriff's Departments. Only one application will be accepted from each agency. No matching funds are required.

The following items will NOT be considered for funding:

- Salaries, Overtime, Fringe Benefits Related to Salaries
- Contractual Services
- Electronic Immobilization Devices
- Drug Court Programs
- Real Estate
- Vessel or Aircraft
- Construction Projects
- Buy Money

**Award Period:** The project award period is July 1, 2008 through March 31, 2009.

#### REJECTION OF PROPOSALS

The Arkansas State Police reserves the right to reject any or all proposals, to waive informalities and minor irregularities in proposals received, and to accept any portion of the proposal or all items proposed, if deemed in the best interest of the State of Arkansas to do so. Failure of the applicant to provide any information requested in the application shall be the responsibility of the applicant agency, and may result in disqualification of the applicant. The fact that an applicant meets eligibility requirements and applies for eligible services, does not guarantee funding.

## APPLICATION PROCESS

### 1. Complete all sections of the application:

- Applicant Information
- Budget Narrative
- Budget Proposal
- Project Description
- Problem Statement
- Project Plan, Goals and Objectives

Limit your narrative to the space provided or the space limitations indicated for each section. See the following section “Application Instructions” for additional information about completing the application.

### 2. Submit one original application to:

Arkansas State Police  
Attn: Cathalene Purvis  
1 State Police Plaza Drive  
Little Rock, AR 72209-4822  
(501) 618-8335

Faxed or late applications *will not* be accepted. Failure to submit a complete application may result in denial of funding. Staple or clip the application pages and appendices together to secure each copy as an identifiable unit.

- **DO NOT include binders, covers, dividers, or other embellishments.**
- **DO NOT alter the order of the sections, format and space allocations requested for each section.**

### 3. Timelines and Procedures.

- **July 1, 2008**  
*Applications are placed on the Arkansas State Police website.*
- **August 1, 2008**  
*Completed Applications must be received at the Arkansas State Police by end of business day.*
- **August 6, 2008**  
*Special State Asset Forfeiture Committee reviews the requests for applications.*
- **August 25, 2008**  
*Announcement of Awards and Non Awards.*
- **August 26, 2008**  
*Statement of Grant Awards mailed with Memorandum of Understanding.*
- **September 2, 2008**  
*Statement of Grant Awards due back to Arkansas State Police.*

## CRITERIA FOR FUNDING

## **SPECIAL STATE ASSETS FORFEITURE FUND**

The following is a list of criteria for funding for the Special Assets Forfeiture Fund:

- The application addresses a critical public safety need.
- The application provides an adequate justification of need.
- Goals and Objectives are time-framed and measurable.
- Budget is reasonable and justified including a cost basis for the cost estimate.
- The method to be used to measure the success of the project is described.
- The Special Assets Forfeiture Fund Committee will award funds, which in the Committee's opinion, will best facilitate drug enforcement operations.

Meeting the above criteria does not, in itself, guarantee funding. In making funding recommendations, the Committee must consider several additional factors, such as the total dollars to award, geographical distributions and under served populations.

All material submitted regarding this Announcement becomes the property of the Arkansas State Police and is subject to the Freedom of Information Statutes. Arkansas State Police has the right to use any or all information/material presented in reply to the Announcement, subject to limitations for proprietary or confidential information. The contents of the application will become contractual obligations, if the project is funded.

### **APPLICATION MATERIALS**

Applications, instructions, and supporting documentation can be obtained from the Arkansas State Police website: <http://www.asp.arkansas.gov/>

### **APPLICATION INSTRUCTIONS**

#### **Section I: Applicant Information**

Fill in all requested information. The project duration is July 1, 2008 through March 31, 2009.

#### **Section II: Project Description**

**Problem Statement** – Briefly describe the need for funds and the problem that will be addressed.

**Project Plan and Goals and Objectives** – Describe the specific steps that will be taken to complete the project. Goals must be defined. Each goal should have one or more objectives, including the timeline when the objective will be achieved. For example, if you are purchasing equipment you can create an objective that describes the steps involved in purchasing this equipment and when it will be purchased. Objectives must

be measurable. Please include a description of how each objective will be measured and how overall project success will be determined.

### **Section III: Budget**

The budget *must include* a cost basis for each item. For example:

Equipment 1 Panasonic Toughbook Computer @ \$4,000

Supplies 1 Dell Desktop Computer @ \$2,000

**All purchases must follow approved state or local purchasing procedures. Individual items costing \$2,500 or more with a useful life of more than one year are considered equipment. Individual items costing less than \$2,500 are considered supplies or low value assets.**

If changes need to be made to the budget in excess of 10%, a new budget proposal must be submitted to the Committee for approval before the expense is incurred.

Budget narrative – Explain how the costs were determined and justify the need for the requested line items.

Application Due Date: **August 1, 2008.**

### **Section IV: Reporting Requirements**

The recipient will be required to complete a monthly financial report, due by the 10<sup>th</sup> of the following month. A copy of all receipts must be attached. All expenditures are subject to Arkansas State Police and Legislative Audit Review. All documents must be retained for a period of three (3) years.

Send forms and receipts to:

Arkansas State Police  
Attn: Cathalene Purvis  
1 State Police Plaza Drive  
Little Rock, AR 72209-4822  
(501) 618-8335

***DO NOT RETURN THESE INSTRUCTIONS WITH YOUR APPLICATION.  
THANK YOU***

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Arkansas State Police  
Special State Assets Forfeiture Fund  
2008-2009

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Director  
Colonel Winford E. Phillips



## Application Instructions

**REQUEST FOR APPLICATION**

The Arkansas State Police is accepting applications for the Special State Assets Forfeiture Fund authorized by Act 830 of the Regular Session for the purpose of drug enforcement.

**Eligible Applicants:** Drug Task Forces, Police Departments, and Sheriff's Departments operating within the State of Arkansas. Applications must be made by the chief administrative officer or appropriate person from the local unit of government.

**Matching Requirements:** None

**Length of Funding:** July 1, 2008 – March 31, 2009

**Expenditure Restrictions:** Funds cannot be used for salaries, overtime, fringe benefits related to salaries, contractual services, travel expenses, electronic immobilization devices, Drug Court Programs, real estate, construction projects, and buy money.

**Project Description:** Applicants must provide a clear and concise description of their program.

**Problem Statement:** Applicants must provide a detailed narrative on how the funds would be utilized.

**Budget Narrative:** Applicants must provide a detailed budget on what the funds will be used to purchase. Explain how each budgeted item relates to the program. For example, the narrative should explain why items must be purchased and how the costs were calculated. The budget narrative should justify the specific line items listed in the budget worksheet and demonstrate all costs are reasonable.

**Budget Proposal:** List each item, and its estimated cost. Items should include consumable supplies, hardware, equipment, etc. Overtime, salaries, contract and travel expenses will not be allowed.

**Project Plan, Goals and Objectives:** Describe the specific steps that will be taken to complete the project.

**One Time Funding:** Open competitive process and funding will not be continued.

## REQUIREMENTS AND EVALUATION OF PROPOSALS

### *Minimum Requirements*

- Applicants must be willing to comply with state administrative, financial, evaluation, and other reporting and record keeping requirements subject to Legislative Audit.

### **Criteria for Evaluation**

Applications will be evaluated by the Special State Assets Forfeiture Fund Committee within Arkansas State Police using the criteria listed below.

- The application addresses a critical public safety need.
- The application provides an adequate justification of need.
- Goals and Objectives are time-framed and measurable.
- Budget is reasonable and justified including a cost basis for the cost estimate.
- The method to be used to measure the success of the project is described.
- The Special State Assets Forfeiture Fund Committee will award funds, which in the Committee's opinion, will best facilitate a drug enforcement operations.

### **Evaluation of applications**

Each application will be evaluated against a total possible point score of 100. Applications will be scored based on the following scale:

Applicant Information	10 points
Budget Proposal	20 points
Budget Narrative	10 points
Project Description	20 points
Problem Statement	20 points
Project Plan, Goals, & Objectives	20 points
Total	100 points maximum

The application will be reviewed and assigned points based on the Committee's evaluation. Once all the applications have been evaluated, the committee will rank them in order of the highest score first. **The top six (6) applicants** will be considered for funding and a Memorandum of Understanding will be sent to the applicants. Applicants will have seven (7) days to sign and return the Memorandum of Understanding to the Committee.

## APPLICATION FOR ASP SPECIAL STATE ASSETS FORFEITURE FUND

Applicant Identifier		State Application Identifier	
1. Date Submitted	2. Date Received by ASP	3. Date Received by Committee	
4. Applicant Information			
Legal Name:		Organizational Unit:	
Address <i>(give city, county, state, and zip code)</i> :		Name and telephone number of the person to be contacted on matters involving this application <i>(give area code)</i>	
5. Employer Identification Number <i>(EIN)</i> :		6. Type of Applicant: <i>(enter appropriate letter)</i> _____ A. State B. County C. Municipal D. Other (Specify): _____	
7. Name of Agency:		9. Areas Affected By Project <i>(cities, counties, state, etc.)</i> :	
8. Descriptive Title of Applicant's Project:			
10. Proposed Project:		11. Congressional Districts Of:	
Start Date	Ending Date	A. Applicant	B. Project
12. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION IS TRUE AND CORRECT, THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE MEMORANDUM OF UNDERSTANDING IF THE ASSISTANCE IS AWARDED.			
A. Typed Name of Authorized Representative		B. Title	
C. Telephone Number		D. Date Signed	
E. Signature of Authorized Representatives			
Prosecuting Attorney/Chief Operating Officer		Date	
Agency Director/Other		Date	

**Arkansas State Police  
Project Description**

Agency \_\_\_\_\_

Requested Amount \_\_\_\_\_

**Project Description**

**Problem Statement**

**Project Plan, Goals, & Objectives**

