

U.S. Department
of Transportation
Pipeline and Hazardous
Materials Safety
Administration

PIPELINE SAFETY
2011 One Call Application
for

NORTH DAKOTA PUBLIC SERVICE COMMISSION

Please follow the directions listed below:

1. Review the entire document for completeness.
2. Review and have an authorized signatory sign the main application page, page 2.
3. Attach the printed SF-424 and SF-424A forms from the Grants.gov package.
4. Fasten all pages with a paper or binder clip - no staples please as this package will be scanned upon it's arrival at PHMSA.
5. Mail the entire document, including this cover page to the following:

ATTN: Gwendolyn M. Hill
U.S. Department of Transportation
Pipeline & Hazardous Materials Safety Administration
Pipeline Safety, PHP-50
1200 New Jersey Avenue, SE Second Floor E22-321
Washington, D.C. 20590

FedSTAR Information

Electronic Submission Date: 11/4/2010 11:53:13 AM



Pipeline and Hazardous Materials Safety Administration
1200 New Jersey Avenue, SE
Washington DC 20590

DEPARTMENT OF TRANSPORTATION

PIPELINE AND HAZARDOUS MATERIALS SAFETY ADMINISTRATION

2011 One Call Application

Office: NORTH DAKOTA PUBLIC SERVICE COMMISSION

Contact: Fahn, Patrick

Priority	Project Title	Request
3	2011 Damage Prevention Awareness - Billboard advertising Development and/or conduct of damage prevention awareness campaigns - Advertisements	\$10,000.00
Project Totals		\$10,000.00

Patrick Fahn

Authorized Signature

November 4, 2010

Date

Director, Compliance and Competitive Markets

Title

Has this activity been performed previously? If so, what was the resulting effectiveness? If you reference your 2010 Progress Report for this information, please keep in mind that insufficient details about the effectiveness of this project will jeopardize the approval of this project for 2011.

Yes, all previous grant awards have been for damage prevention awareness including 811 awareness campaigns. The results are very difficult to judge. Chad Olson, representative from North Dakota One Call, stated he has seen the billboards around the state and they are very well done, catch your eye and present the desired message. He has heard from several other individuals who have seen the billboards and took the time to mention that they are effective, unlike the newspaper ads that were tried a few years ago that noone seemed to notice or took the time to mention.

What do you plan to do with the 2011 requested funds for this project?

Grant funds for 2011 will again be used to fund billboard advertising throughout the State of North Dakota. Grant funds have been previously used to purchase space on approximately 20 billboards across the state. The billboards have been strategically placed to achieve the best motoring homeowner and excavator coverage. The billboards have been placed in the major markets throughout North Dakota with billboards in each of the following cities: Beulah, Bismarck (2), Bowman, Carrington, Devils Lake, Dickinson, Fargo (2), Garrison (2), Grand Forks, Jamestown, Mandan, Minot (2), Rugby, Valley City, Wahpeton, and Williston. Billboard advertising in selected locations throughout North Dakota has targeted the general public as a whole to convey the need to call the North Dakota One-Call 800 number or 811 at least 48 hours before the beginning of any digging. Billboard advertising is a high-impact way of getting an advertising message across to the residents of North Dakota.

Please indicate the One Call Enforcement Authority for your State and/or Agency:

All matters coming before the Commission subject to North Dakota Century Code Chapters 28-32 and 49-07. Complaints are subject to North Dakota Administrative Code Chapter 69-02-02.

Estimated Budget for this Project:

Personnel	\$0.00
Fringe Benefits	\$0.00
Travel	\$0.00
Equipment	\$0.00
Supplies	\$0.00
Contractual	\$10,000.00
Other	\$0.00
Indirect	\$0.00

Total Requested Cost for this Activity: \$10,000.00

Are the One Call Application Funds to be transferred to other than "NORTH DAKOTA PUBLIC SERVICE COMMISSION"? No

Is there Equipment and/or Items associated with this activity? Yes

Qty	% use for pipeline damage prevention (min 50%)	Total Cost	Associated with Contract?	Description
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% use for
Associated with
Description
Contract?
damage?
prevention

20	100	\$10,000.00	<input checked="" type="checkbox"/>	Twenty billboards will be placed across the State of North Dakota for public awareness of the need to call one-call using 811 or the 800 # at least 48 hours before digging.
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Opportunity Title:	DOT PHMSA 2011 One Call Grant
Offering Agency:	Pipeline & Hazardous Material Safety Administration
CFDA Number:	20.721
CFDA Description:	PHMSA Pipeline Safety Program One Call Grant
Opportunity Number:	DOT-PH-PHP-11-OC
Competition ID:	
Opportunity Open Date:	08/30/2010
Opportunity Close Date:	11/23/2010
Agency Contact:	Carrie Winslow PMHSA Grant Team E-Mail: carrie.winslow@dot.gov Phone: 617-494-3318

This electronic grants application is intended to be used to apply for the specific Federal funding opportunity referenced here.

If the Federal funding opportunity listed is not the opportunity for which you want to apply, close this application package by clicking on the "Cancel" button at the top of this screen. You will then need to locate the correct Federal funding opportunity, download its application and then apply.

This opportunity is only open to organizations, applicants who are submitting grant applications on behalf of a company, state, local or tribal government, academia, or other type of organization.

* Application Filing Name: ND One Call Application

Mandatory Documents

Move Form to Complete

Move Form to Delete

Mandatory Documents for Submission

Application for Federal Assistance (SF-424)
Budget Information for Non-Construction Program

Optional Documents

Move Form to Submission List

Move Form to Delete

Optional Documents for Submission

Instructions

- 1** Enter a name for the application in the Application Filing Name field.

 - This application can be completed in its entirety offline; however, you will need to login to the Grants.gov website during the submission process.
 - You can save your application at any time by clicking the "Save" button at the top of your screen.
 - The "Save & Submit" button will not be functional until all required data fields in the application are completed and you clicked on the "Check Package for Errors" button and confirmed all data required data fields are completed.
- 2** Open and complete all of the documents listed in the "Mandatory Documents" box. Complete the SF-424 form first.

 - It is recommended that the SF-424 form be the first form completed for the application package. Data entered on the SF-424 will populate data fields in other mandatory and optional forms and the user cannot enter data in these fields.
 - The forms listed in the "Mandatory Documents" box and "Optional Documents" may be predefined forms, such as SF-424, forms where a document needs to be attached, such as the Project Narrative or a combination of both. "Mandatory Documents" are required for this application. "Optional Documents" can be used to provide additional support for this application or may be required for specific types of grant activity. Reference the application package instructions for more information regarding "Optional Documents".
 - To open and complete a form, simply click on the form's name to select the item and then click on the => button. This will move the document to the appropriate "Documents for Submission" box and the form will be automatically added to your application package. To view the form, scroll down the screen or select the form name and click on the "Open Form" button to begin completing the required data fields. To remove a form/document from the "Documents for Submission" box, click the document name to select it, and then click the <= button. This will return the form/document to the "Mandatory Documents" or "Optional Documents" box.
 - All documents listed in the "Mandatory Documents" box must be moved to the "Mandatory Documents for Submission" box. When you open a required form, the fields which must be completed are highlighted in yellow with a red border. Optional fields and completed fields are displayed in white. If you enter invalid or incomplete information in a field, you will receive an error message.
- 3** Click the "Save & Submit" button to submit your application to Grants.gov.

 - Once you have properly completed all required documents and attached any required or optional documentation, save the completed application by clicking on the "Save" button.
 - Click on the "Check Package for Errors" button to ensure that you have completed all required data fields. Correct any errors or if none are found, save the application package.
 - The "Save & Submit" button will become active; click on the "Save & Submit" button to begin the application submission process.
 - You will be taken to the applicant login page to enter your Grants.gov username and password. Follow all onscreen instructions for submission.

Application for Federal Assistance SF-424	
* 1. Type of Submission: <input type="checkbox"/> Preapplication <input checked="" type="checkbox"/> Application <input type="checkbox"/> Changed/Corrected Application	
* 2. Type of Application: <input checked="" type="checkbox"/> New <input type="checkbox"/> Continuation <input type="checkbox"/> Revision	
* If Revision, select appropriate letter(s): _____ * Other (Specify): _____	
* 3. Date Received: Completed by Grants.gov upon submission.	4. Applicant Identifier: _____
5a. Federal Entity Identifier: _____	5b. Federal Award Identifier: _____
State Use Only:	
6. Date Received by State: 10/27/2010	7. State Application Identifier: ND101027-0461
8. APPLICANT INFORMATION:	
* a. Legal Name: NORTH DAKOTA PUBLIC SERVICE COMMISSION	
* b. Employer/Taxpayer Identification Number (EIN/TIN): 45-0309764	* c. Organizational DUNS: 802744946
d. Address:	
* Street1: 600 E Boulevard 12th Fl	_____
Street2:	_____
* City: Bismarck	_____
County/Parish:	_____
* State: ND: North Dakota	_____
Province:	_____
* Country: USA: UNITED STATES	_____
* Zip / Postal Code: 58505-0480	_____
e. Organizational Unit:	
Department Name: _____	Division Name: _____
f. Name and contact information of person to be contacted on matters involving this application:	
Prefix: Mr.	* First Name: Patrick
Middle Name:	_____
* Last Name: Fahn	_____
Suffix:	_____
Title: Division Director	
Organizational Affiliation: _____	
* Telephone Number: 701-328-4077	Fax Number: _____
* Email: pfahn@nd.gov	

Application for Federal Assistance SF-424

*** 9. Type of Applicant 1: Select Applicant Type:**

A: State Government

Type of Applicant 2: Select Applicant Type:

Type of Applicant 3: Select Applicant Type:

* Other (specify):

*** 10. Name of Federal Agency:**

Pipeline & Hazardous Material Safety Administration

11. Catalog of Federal Domestic Assistance Number:

20.721

CFDA Title:

PHMSA Pipeline Safety Program One Call Grant

*** 12. Funding Opportunity Number:**

DOT-PH-PHP-11-OC

* Title:

DOT PHMSA 2011 One Call Grant

13. Competition Identification Number:

Title:

14. Areas Affected by Project (Cities, Counties, States, etc.):

Add Attachment

Delete Attachment

View Attachment

*** 15. Descriptive Title of Applicant's Project:**

NORTH DAKOTA PUBLIC SERVICE COMMISSION One Call Application

Attach supporting documents as specified in agency instructions.

Add Attachments

Delete Attachments

View Attachments

Application for Federal Assistance SF-424

16. Congressional Districts Of:

* a. Applicant

b. Program/Project

Attach an additional list of Program/Project Congressional Districts if needed.

17. Proposed Project:

* a. Start Date:

* b. End Date:

18. Estimated Funding (\$):

* a. Federal	<input type="text" value="10,000.00"/>
* b. Applicant	<input type="text" value="0.00"/>
* c. State	<input type="text" value="0.00"/>
* d. Local	<input type="text" value="0.00"/>
* e. Other	<input type="text" value="0.00"/>
* f. Program Income	<input type="text" value="0.00"/>
* g. TOTAL	<input type="text" value="10,000.00"/>

*** 19. Is Application Subject to Review By State Under Executive Order 12372 Process?**

a. This application was made available to the State under the Executive Order 12372 Process for review on

b. Program is subject to E.O. 12372 but has not been selected by the State for review.

c. Program is not covered by E.O. 12372.

*** 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes," provide explanation in attachment.)**

Yes No

If "Yes", provide explanation and attach

21. *By signing this application, I certify (1) to the statements contained in the list of certifications and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)**

** I AGREE

** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.

Authorized Representative:

Prefix:

* First Name:

Middle Name:

* Last Name:

Suffix:

* Title:

* Telephone Number:

Fax Number:

* Email:

* Signature of Authorized Representative:

* Date Signed:

BUDGET INFORMATION - Non-Construction Programs

SECTION A - BUDGET SUMMARY

Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		Total (g)
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	
1. Priority 1		\$	\$	0.00	\$	0.00
2. Priority 2				0.00		0.00
3. Priority 3				10,000.00		10,000.00
4.						
5. Totals		\$	\$	10,000.00	\$	10,000.00

SECTION B - BUDGET CATEGORIES

6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY				Total (5)
	(1) Priority 1	(2) Priority 2	(3) Priority 3	(4)	
a. Personnel	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$
b. Fringe Benefits	0.00	0.00	0.00	0.00	
c. Travel	0.00	0.00	0.00	0.00	
d. Equipment	0.00	0.00	0.00	0.00	
e. Supplies	0.00	0.00	0.00	0.00	
f. Contractual	0.00	0.00	10,000.00	10,000.00	10,000.00
g. Construction	0.00	0.00	0.00	0.00	
h. Other	0.00	0.00	0.00	0.00	
i. Total Direct Charges (sum of 6a-6h)	0.00	0.00	10,000.00	10,000.00	\$ 10,000.00
j. Indirect Charges	0.00	0.00	0.00	0.00	\$
k. TOTALS (sum of 6i and 6j)	\$ 0.00	\$ 0.00	\$ 10,000.00	\$ 10,000.00	\$ 10,000.00
7. Program Income	\$	\$	\$	\$	\$

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SECTION C - NON-FEDERAL RESOURCES

(a) Grant Program		(b) Applicant	(c) State	(d) Other Sources	(e) TOTALS
8.	PRIORITY 1	\$	\$	\$	\$
9.	PRIORITY 2				
10.	PRIORITY 3				
11.					
12.	TOTAL (sum of lines 8-11)	\$	\$	\$	\$

SECTION D - FORECASTED CASH NEEDS

		Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
13.	Federal	\$	\$	\$	\$	\$
14.	Non-Federal	\$				
15.	TOTAL (sum of lines 13 and 14)	\$	\$	\$	\$	\$

SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT

(a) Grant Program		FUTURE FUNDING PERIODS (YEARS)			
		(b) First	(c) Second	(d) Third	(e) Fourth
16.	PRIORITY 1	\$	\$	\$	\$
17.	PRIORITY 2				
18.	PRIORITY 3				
19.					
20.	TOTAL (sum of lines 16 - 19)	\$	\$	\$	\$

SECTION F - OTHER BUDGET INFORMATION

21.	Direct Charges:	
22.	Indirect Charges:	
23.	Remarks:	

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