



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

1200 New Jersey Avenue SE  
Washington DC 20590

**PIPELINE SAFETY**  
**2012 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: 11/8/2011 2:51:31 PM



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

DEPARTMENT OF TRANSPORTATION

PIPELINE AND HAZARDOUS MATERIALS SAFETY ADMINISTRATION

2012 One Call Application

Office: NORTH DAKOTA PUBLIC SERVICE COMMISSION

Contact: Fahn, Patrick



Priority	Project Title	Request
3	2012 Damage Prevention Awareness - Billboard advertising Development and/or conduct of damage prevention awareness campaigns - Advertisements	\$10,000.00

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**Project Totals** **\$10,000.00**

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*Patrick Fahn*  
 \_\_\_\_\_  
 Authorized Signature

*November 8, 2011*  
 \_\_\_\_\_  
 Date

*Director, Compliance and Competitive Markets Division*  
 \_\_\_\_\_  
 Title



**Development and/or conduct of damage prevention awareness campaigns - Advertisements**

**Has this activity been performed previously? If so, what was the resulting effectiveness? If you reference your 2011 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 2012.**

Yes, all previous grant awards have been for damage prevention awareness including 811 awareness campaigns. The results are very difficult to quantify. Chad Olson, representative from North Dakota One Call, states that the billboards are very effective. The billboards placed around the state are very well done, catch your eye and present the desired message. He continues to hear from individuals who have seen the billboards and took the time to mention that they are effective. I could only hope for additional funding to increase the number of billboards in the Williston Basin region of North Dakota where oil activity has tremendously increased.

**What do you plan to do with the 2012 requested funds for this project? If you have entered costs under the "Other" budget category, you must explain those costs here.**

Grant funds for 2012 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 18 to 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: Bismarck (2), Mandan, Dickinson, Bowman, Beulah, Grand Forks (2), Jamestown, Wahpeton, Devils Lake, Valley City, Carrington, Minot (2), West Fargo, Fargo, and Garrison. 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"?**

Yes, A Contractor; Newman Outdoor Advertising

What is the amount to be contracted?

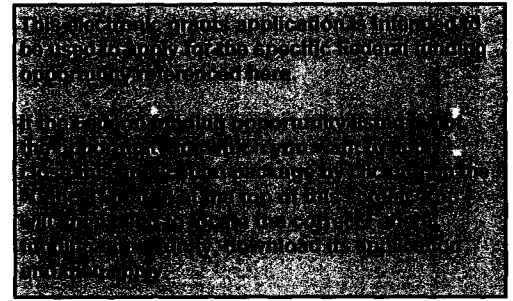
\$10,000.00

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

No



<b>Opportunity Title:</b>	DOT PHMSA 2012 One Call Grant
<b>Offering Agency:</b>	Pipeline & Hazardous Material Safety Administration
<b>CFDA Number:</b>	20.721
<b>CFDA Description:</b>	PHMSA Pipeline Safety Program One Call Grant
<b>Opportunity Number:</b>	DOT-PH-PHP-12-OC
<b>Competition ID:</b>	
<b>Opportunity Open Date:</b>	10/19/2011
<b>Opportunity Close Date:</b>	11/21/2011
<b>Agency Contact:</b>	Carrie Winslow PHMSA Grant Team E-mail: carrie.winslow@dot.gov Phone: 617-494-3318



**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

- 
**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.
  
- 
**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.
  
- 
**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**

<b>* 1. Type of Submission:</b> <input type="checkbox"/> Preapplication <input checked="" type="checkbox"/> Application <input type="checkbox"/> Changed/Corrected Application	<b>* 2. Type of Application:</b> <input checked="" type="checkbox"/> New <input type="checkbox"/> Continuation <input type="checkbox"/> Revision	<b>* If Revision, select appropriate letter(s):</b> _____ <b>* Other (Specify):</b> _____
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<b>* 3. Date Received:</b> Completed by Grants.gov upon submission.	<b>4. Applicant Identifier:</b> _____
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<b>5a. Federal Entity Identifier:</b> _____	<b>5b. Federal Award Identifier:</b> _____
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**State Use Only:**

<b>6. Date Received by State:</b> _____	<b>7. State Application Identifier:</b> _____
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**8. APPLICANT INFORMATION:**

**\* a. Legal Name:** NORTH DAKOTA PUBLIC SERVICE COMMISSION

<b>* b. Employer/Taxpayer Identification Number (EIN/TIN):</b> 45-0309764	<b>* c. Organizational DUNS:</b> 802744946
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**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:**

<b>Department Name:</b> _____	<b>Division Name:</b> _____
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**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@end.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:

[Empty text box]

Type of Applicant 3: Select Applicant Type:

[Empty text box]

\* Other (specify):

[Empty text box]

**\* 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-12-OC

\* Title:

DOT PHMSA 2012 One Call Grant

**13. Competition Identification Number:**

[Empty text box]

Title:

[Empty text box]

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

[Empty text box] [Redacted] [Redacted] [Redacted]

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

NORTH DAKOTA PUBLIC SERVICE COMMISSION One Call Application

Attach supporting documents as specified in agency instructions.

[Redacted] [Redacted] [Redacted]

**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**

OMB Approval No. 4040-0006  
Expiration Date 07/30/2010

**SECTION A - BUDGET SUMMARY**

Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1. Priority 1		\$	\$	0.00	\$	\$ 0.00
2. Priority 2				0.00		0.00
3. Priority 3				10,000.00		10,000.00
4.						
<b>5. Totals</b>		\$	\$	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)	
<b>a. Personnel</b>	\$ 0.00	\$ 0.00	\$ 0.00	\$	\$
<b>b. Fringe Benefits</b>	0.00	0.00	0.00		
<b>c. Travel</b>	0.00	0.00	0.00		
<b>d. Equipment</b>	0.00	0.00	0.00		
<b>e. Supplies</b>	0.00	0.00	0.00		
<b>f. Contractual</b>	0.00	0.00	10,000.00		10,000.00
<b>g. Construction</b>	0.00	0.00	0.00		
<b>h. Other</b>	0.00	0.00	0.00		
<b>i. Total Direct Charges (sum of 6a-6h)</b>	0.00	0.00	10,000.00		\$ 10,000.00
<b>j. Indirect Charges</b>	0.00	0.00	0.00		\$
<b>k. TOTALS (sum of 6i and 6j)</b>	\$ 0.00	\$ 0.00	\$ 10,000.00	\$	\$ 10,000.00
<b>7. Program Income</b>	\$	\$	\$	\$	\$

Authorized for Local Reproduction

SECTION C - NON-FEDERAL RESOURCES					
(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(e) TOTALS	
8. PRIORITY 1	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	
9. PRIORITY 2	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	
10. PRIORITY 3	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	
11.	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	
12. TOTAL (sum of lines 8-11)	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	
SECTION D - FORECASTED CASH NEEDS					
	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
13. Federal	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>
14. Non-Federal	\$ <input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>
15. TOTAL (sum of lines 13 and 14)	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>
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	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	
17. PRIORITY 2	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	
18. PRIORITY 3	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	
19.	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	<input style="width: 80%;" type="text"/>	
20. TOTAL (sum of lines 16 - 19)	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	\$ <input style="width: 80%;" type="text"/>	
SECTION F - OTHER BUDGET INFORMATION					
21. Direct Charges: <input style="width: 80%;" type="text"/>		22. Indirect Charges: <input style="width: 80%;" type="text"/>			
23. Remarks: <input style="width: 80%;" type="text"/>					