# Request for Public Assistance (RPA) Guide-Private Nonprofits (PNPs)

How do I submit my organization's RPA once I have a Grants Portal account?

## Start

- Log into your Grants Portal Account. You can follow this link to get to the login page. <u>https://grantee.fema.gov/</u>
- Once logged in, go to your "Organization Profile" from the pull down menu on the left of your screen.



- This will bring you to your "Organizational Profile. Here you can view and edit your organization's information and submit RPAs.
- Scroll down until you find the "applicant Even Profiles" section, and press the button that says "Request Public Assistance".

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✓     My Tasks       ★     Calendar       ★     Subrecipients       ↓     Organization Profiles       ↓     Organization Personnel       ↓     Applicant Event Profiles	General Information organization name state/tribe/territory type	Maryland Emergency Management Agency County Government	FEMA PA CODE EIN NUMBER DUNS NUMBER IS ACTIVE?	 Yes DEACTIVATE			
<ul> <li>Exploratory Calls</li> <li>Recovery Scoping Meetings</li> </ul>	😫 Personnel >					🌣 MAN	NAGE
<ul> <li>Projects</li> <li>Damages</li> </ul>	Cocations >					S MAN	AGE
<ul> <li>Work Order Requests</li> <li>Work Orders</li> </ul>	Counties with Facility >					🌣 MAN	AGE
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Intelligence	▲ Applicant Event Profiles	•			QUEST P	UBLIC ASSISTA	ANCE

 The RPA is a step by step wizard that will guide you through submitting your RPA. It will not allow you to move forward until you have completed all necessary steps. To start, read through the text on the screen, ad then hit the **Blue** "Proceed" Button on the bottom.

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Dashboard     My Organization      Maryland Emergency Management     Agency (000-U295-00)	📝 Request Public Assistance	
🗹 My Tasks 🗸 🗸	Start         Section I - Declaration and Applicant         Section II - Applicant Experience         Section III - Impacts         Section IV - Applicant Certifications           Information         Information<	Section V
🛗 Calendar		
🚠 Subrecipients 🗸 🗸	Start	
🗹 Subrecipient Tasks 🗸	Paperwork Burden Disclosure Notice	
✔     Utilities     ✔       ③     Intelligence     ✔	Public reporting burden for this data collection is estimated to average 5 minutes per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and mainta needed, and completing and submitting this form. This collection of information is required to obtain or retain benefits. You are not required to respond to this collection of information unless a valid OMB control numl in the upper right corner of this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing the burden to:	ining the data per is displayed
۲	Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 500 C Street, SW., Washington, DC 20472, Paperwork Reduction Project (1660-0017)	
	NOTE: Do not send your completed form to this address.	
	Privacy Act Statement	
	The collection of this information is authorized by the Robert T. Stafford Disaster Relief and Emergency Assistance Act, §§ 402-403, 406-407, 417, 423, 427, 428, 502, and 705; 42 U.S.C. 5170a-b, 5172-73, 5184, 5189a, 5192, 5205; 44 C.F.R. § 206 Subpart G; and 2 C.F.R. § 200. This information is collected to provide assistance to eligible jurisdictions and organizations to facilitate the response to and recovery from a Presidentially-de or emergency, or to provide assistance for hazard mitigation measures during the recovery process. The disclosure of information on this form is voluntary; however, failure to provide the requested information may de the agency from receiving funds from FEMA's Public Assistance Program.	5189e, 5189f, clared disaster alay or prevent
	Instructions	
	Government organizations complete this form to begin the application for Public Assistance following a Federal declaration. FEMA uses this information to determine whether the A states an eligible government e determine the level of resources required to assist the Applicant. FEMA does not use the information to determine the level of assistance it provides.	ntity and to
	The estimated time to complete this form is 5 minutes. Information you will need:	
	Estimated cost of all incident-related impacts     If applicable, authorized contractor contact information	

### Section 1-Declaration and Applicant Information

Ensure that the correct "Event" is selected from the dropdown menu under "General Info". Select the Primary Address, and Mailing Address if it is different from you Primary Address, for your organization. Then press the **Blue "Proceed" Button**.

nts Portal 0 • Request Public Assistance Start Section I - Declaration and Applicant Section II - Applicant Experience Section III - Impacts Section IV - Applicant Certifications Section Information G Section I Instructions Either your organization or one of your subordinate organizations may be eligible to apply for Public Assistance. Below, please indicate the Event for which you are applying for assistance as well as the organization on whose behalf you are applying, as well as confirming the DUNS# and FEMA PA Code (i.e., FIPS Code) Section I - Declaration and Applicant Information Event General Info Organization FFMA PA Code DUNS # 058592189 4491DR-MD (4491DR) Even Organization Primary Address Addresses Address 7915 Anchor Street Landover, Maryland 20785 County Prince George's County Mailing Address (Same as Primary Address) Address < BACK PROCEED

### Section II-Applicant Experience

Select one of the four options for level of experience with the Public Assistance process. We are happy to help you as much as you need so don't hesitate to click any of the four buttons. Then press the **Blue "Proceed" Button**.

Maryland Emergency Management Agency (000-UZ9ES-00)	<b>v</b>	$\diamond$				(
🗹 My Tasks 🗸 🗸	Start	Section I - Declaration and Applicant Information	Section II - Applicant Experience	Section III - Impacts	Section IV - Applicant Certifications	Section \
🛗 Calendar						
👫 Subrecipients 🗸 🗸	<b>A</b> Se	action II Instructions				
🗹 Subrecipient Tasks 🗸	Ple	ase provide information about the Applicant's level of expe	erience with the Public Assistance program.			
🗲 Utilities 🗸 🗸			1.5			
	Sec	tion II - Applicant Exper	rience			
۲	What is O Un O In O Fa O Fa	the Applicant's experience and level of sup familiar, and likely to need dedicated, in-person support na familiar, but likely to be comfortable with limited or remote miliar, but likely to need dedicated, in-person support navig miliar, and likely to be comfortable with limited or remote s	pport needed with the Public Assistar avigating the process. e support navigating the process. gating the process. support navigating the process.	nce application process? *		

### Section III-Impacts

- Complete all questions, and potential drop down questions that may appear as you answer the questions in this section, to the best of your knowledge. If you don't know the answer, fill in the best you can. This can be changed later. This is to gauge your needs as an applicant.
- Once you have completed all the questions, press the Blue "Proceed" Button.



### Section IV-Facility Information

• Click the Green "Add Facility" Button and enter all required information.



#### Once you have answered all question about your facility:

a) click the Green "Add Facility" Button if you have more than one facility.b) If you have finished entering facilities, click the Blue "Proceed" Button.

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<ul> <li>Dashboard</li> <li>My Organization</li> </ul>	🕜 Request Public Assistance	
aryland Emergency Management Agency (000-UZ9ES-00)	Long-Term Care Facility	
My Tanka 💙	Rehabilitation Center Providing Medical Care	
🛱 Calendar	Other	
Subrecipients	B. Non-Critical Essential Social Service	
Organization Profiles	Assisted Living Facility	
· Applicant Event Profiles	Childcare, Including Center-Based Childcare	
Evoloratory Calls	Day care for individuals with disabilities or access and functional needs	
···· Recovery Sconing	Community Center	
Meetings	Custodial Care Facility	
··· Projects	Food Assistance Programs, Including Food Banks and Storage of Food for Food Banks	
Damages	Health and Safety Services, Including Animal Control Services	
··· Work Order Requests	Homeless Shelter	
··· Work Orders	House of Worship (Religious Institution)	
🖸 Subrecipient Tasks 💙	Library	
🗲 Utilities 🔷 👻	Low-income Housing	
Intelligence	Museum (1	<mark>a \</mark>
	Performing Arts Center	
	Rehabilitation Facility (not providing medical services as listed in 3A; Critical Services above)	
	Residential or Other Services for Families of Domestic Abuse	
	Residential Services for Individuals with Disabilities	
	Senior Citizen Center	
	Shelter Workshop	
	Zoo	
	Other	
	C. What other services does the facility provide? (More Info)	
		+ ADD FACILITY
	< BACK	PROCEED >

### Section V-Add Documents

As a Private Nonprofit, certain documents are required to submit your RPA. To add these documents, click the **Blue "+ Add Document" Button** next to each Red "Required" tab.



- When you click the "+ Add Documents" button, a pop up window will appear for you to add the needed documents.
- You can drag/drop filed or click the Blue Arrow next to "Drag and drop..." to select a file from your computer.
- Once you have added at least one document, the **Green "Attach Selected" Button** will become clickable.

BGran	Attach Project Applicati	on Documents							Lagola,
Dashboard My Organization and Emergency Managerr Agency (000-UZ9ES-00)			Drag and	dron files her	e or click here to	select files			
My Tasks				arop meo ner	s, or onor nere to				ction VII - S
Calendar									
Subrecipients	Selected Documents to	Attach							
Organization Profile Organization Person	No documents selected. To below.	begin uploading a document, e	ither drag and drop a file into t	the area above, click t	he area above to upload	a file manually, or attach a do	cument from the Available Docur	nents to Attach section	
Applicant Event Prof	Note: You may not upload th	he document to the Project App	lication that matches an exist	ing document with sa	me document area.				
Exploratory Calls									
Recovery Scoping Meetings	Available Documents to	o Attach							
Projects	Category	× Proof of Ownership							
Damages Work Order Request	Q Quick Search	0						SHOW/HIDE COLUMNS	
Work Orders	Filename	11 Description	L1 Category	11	Size 11	Uploaded Date	11 Uploaded By	1	t'
Subrecipient Tasks				No matching r	ecords <mark>f</mark> ound				
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Intelligence									
							I ATTACH SE	CANCEL	

- Once you have added all the required documents, the Red "Required" tab will turn to Green "Requirement Met".
- Press the Blue "Proceed" Button.



### Section VI-Applicant Certifications

- Select a "Primary Contact" from the dropdown menu. If there is only one Point of Contact in the Organization Profile, then you will only have one person on this list. This is the person that must initial and sign at the bottom of this screen.
- Once you have chosen your contacts and initials each box under "General Certification" click the yellow "Click to Sign" Button.

Start	Section I - Decla Info	ration and Applicant rmation	Section II - Applicant Experience	Section III - Impacts	Section IV - Facility Information	Section V - Documents	Section VI - Applicant Certifications	Sectio
	Section VI Instruct Please provide contact infor	ions mation for the contract peri	ionnel authorized to make binding decisions on beh	alf of the entity.				
	Section VI - A	pplicant Ce	ertifications					
	Primary Contact *							
		Name Sure,	Not			-		
		Title Preside	ent					
		Email fixthec	rons@itswbatplantscrave.org					
		Phone (000) 0						
	Alternate Contact	Phone (000) 0	00-0000					
	Alternate contact	Name Choo	se Contact			-		
		Title						
		Email						
		Phone						
	General Certification	louing information regardin	a requiremente to receive Public Assistance: Places	a initial payt to each statement				
	Applicants sho	uld document damages wit	h photos and track all resources used at the site inc	cluding dates and quantities.				
	Applicants mu	st comply with the applicab	e codes, specifications and standards requirement:	s when restoring infrastructure.				
	In accordance	with the PAPPG, the Applica	ant must comply with applicable federal, state, and I	local laws must provide all documentation r	equested to allow FEMA to ensure project	comply with federal Environmental and Histo	ric Preservation (EHP) laws, implementing regulations	s. and
	Executive Orders; and must	comply with any EHP compl	iance conditions placed on all grants.				ne reservation (en ) iano, imperiorany regulatione	
	Applicants that	t utilize contractors for work	conducted with FEMA PA funding must follow the	procurement and contracting rules detailed	in 2 CFR § 200.318-326			
	Authorized Represe	ntative			CLICK TO SIGN	Date Signed		

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201	Record General Certification	on Signature	×	Ø	•	<b>2</b>
ß	Authorized Representative *	Select				
	Date Signed *	<b></b>				
	Signed Document *	+ Upload Signed Document				
	Print Name *					
	Signature Style *	Allura		nt		
		Example: allura				
	Enter Password *			ıre.		
			SIGN O CANCEL	HP) laws,		
1	n Applican detailed in 2 CFR § 200	ts that utilize contractors for work conducted with FEMA PA funding must follow ).318-326.	the procurement and contractin	ng rules		
	Authorized	CLICK TO SIGN Date Si	gned			



- In order to complete all requirements in this pop up and sign, you will need a PDF document with your signature, and you will need to upload it in order to continue, by clicking the "+Upload Signed Document" link.
- Select the person who will sign from the "Authorized Representative" dropdown menu.
- Select the correct date from the Calendar Button in "Date Signed".
- Type in your name in "Print Name" and, if you wish, change the "Signature Style".
- Enter your Grants Portal Password in the box next to "Enter Password" and then Click the **Blue "Sign" Button**.
- Once you have signed, and the pop up window closes, ensure that the correct date auto filled, and then Press the **Blue "Proceed" Button**.

### Submit

- Review the RPA on the screen to ensure that all the information is correct.
- When you are done, press the **Blue "Submit" Button**.

			Phone (000) 000-000	0					
Penuests		General C	ertification						
lequests	I certify that I have reviewed the following information regarding requirements to receive Public Assistance:								
		ns	Applicants should document dama	ges with photos and track all resources used at the site including dates a	nd quantities.				
nt Tasks 🗸		ns	Applicants must comply with the a	pplicable codes, specifications and standards requirements when restorin	ng infrastructure.				
• •		ns with federal	In accordance with the PAPPG, the Environmental and Historic Preserva	Applicant must comply with applicable federal, state, and local laws must	t provide all documentation requested to all st comply with any EHP compliance condition	ow FEMA to ensure project applications comply ons placed on all grants.			
		ns	Applicants that utilize contractors	for work conducted with FEMA PA funding must follow the procurement a	nd contracting rules detailed in 2 CFR § 200	.318-326.			
			Authorized Representative	Not Sure	Date Signed	09/25/2020			
			Signed on Behalf By		Signed on Behalf Date	09/25/2020			
			Signed Document	L NOT SURE.pdf					
		< BACK							

### Post-Submission

• Once you have submitted your RPA, the event will show up under your "Applicant Event Profiles". To view the event click the magnifying glass.

