



**NEW MEXICO DEPARTMENT OF HOMELAND  
SECURITY & EMERGENCY MANAGEMENT  
Hazardous Materials Emergency Preparedness (HMEP)  
FFY 2021 Sub-Grant Application**



**Complete application submittal is due April 30, 2021 by 5:00pm. This includes both hard copy and digital version.  
Late submittals will not be accepted.**

**REQUIRED hard copy submittal** received by **April 30, 2021** by 5:00pm

**For all activities combined**, include one of the following;

1. Cover Sheet (must include three signatures, contact information, list of activities in priority order) – page 2 of the Application
2. Certification - page 3 of the Application
3. Section 4 Budget and Match - page 7 of the Application
4. SF424A

**For each activity** complete and attach the appropriate Section sheets, depending on the activity type

1. Section 1 of the Application is for Planning (i.e., Commodity Flow Surveys, Regional Hazard Analysis) - page 4 of the Application
2. Section 2 of the Application is for Training (i.e., Hot Zone Conference, Hazmat Technician Refresher) - page 5 of the Application
3. Section 3 of the Application is for Exercise (i.e., Full Scale Hazmat Exercise) - page 6 of the Application
4. Include Scope of Work Narrative for each activity (Word format—See Appendix C for requirements and Example)
5. Include Budget Narrative for each activity (Word format—See Appendix D for requirements and Example)
6. Include a Budget for each Activity (Excel format—See Appendix D for requirements and Example)

Submit all hard copy materials to Julie Jolly, Hazardous Materials Coordinator, at one of the addresses below.

Fed Ex or UPS: NM DHSEM , 13 Bataan Santa Fe, Blvd., NM 87508

US Postal Service: NM DHSEM, PO Box 27111, Santa Fe, NM 87502

**REQUIRED digital submittal** to [julie.jolly@state.nm.us](mailto:julie.jolly@state.nm.us) by **April 30, 2021** by 5:00pm

1. All Narratives and Budget Narratives as Word documents
2. All spreadsheets as Excel files
3. Full application as one pdf

**Appendix Legend**

Appendix A = Training Activity List

Appendix B = Exercise Activity List

Appendix C = Activity Narrative Requirements and Example

Appendix D = Activity Budget Narrative and Budget Example

Appendix E = Overtime and Backfill

For questions or more information, contact

Julie Jolly, Hazardous Materials Coordinator, at [julie.jolly@state.nm.us](mailto:julie.jolly@state.nm.us) or 505-469-8012

**REQUESTER INFORMATION**

Requester Name:

Date of Request:

Agency/Program/Organization:

Mailing Address:

City:

Zip Code:

Email:

Phone:

Fax:

**GRANT ACTIVITY INFORMATION**

SUB-RECIPIENT'S DUNS NUMBER

SUB-RECIPIENT'S SUPPLIER ID

SUB-RECIPIENT'S EIN

STANDARD PERIOD OF PERFORMANCE START /  
END DATES

10/1/2021 – 7/30/2022

PARTICIPANT OR AUDIENCE

(CHECK ALL THAT APPLY)

 ADMINISTRATION AGRICULTURE EMERGENCY COMMUNICATIONS TRANSPORTATION EMS FIRE/HAZMAT HEALTH HOSPITAL LAW ENFORCEMENT NGO/VOAD PUBLIC WORKS EMERGENCY MANAGEMENT OTHER: \_\_\_\_\_

If requesting more than one activity, list all activities in priority order. Scoring will be based on the priorities identified in the Allocation Methodology.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_
10. \_\_\_\_\_
11. \_\_\_\_\_
12. \_\_\_\_\_
13. \_\_\_\_\_

**CERTIFICATION SHEET**

**Certifying Agent:**

The signatory listed below represent and warrant the authority to allocate the use of sub-grant funds and execute the on behalf of the entity for the activity specified above.

*I certify that:*

- *all information provided in this application is true and correct to the best of my knowledge;*
- *I will provide any requests for additional funding documentation and quarterly reports related to this Project;*
- *all funds will be used only for the activity/project and purposes identified in the application package;*
- *the match does not Supplant already designated funds with Federal Funds; and*
- *requested activities shall be conducted in the current FY (October 1 through July 30).*

Total Amount of Funds Requested: \$

**1. Project Manager:**

Name (Print): \_\_\_\_\_ Title: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Office Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**2. Local Emergency Manager / LEPC Chair/Division:**

Name (Print): \_\_\_\_\_ Title: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Office Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**3. Financial Contact:**

Name (Print): \_\_\_\_\_ Title: \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Office Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

# SECTION 1 – PLANNING ACTIVITY REQUEST

ACTIVITY NAME:

ACTIVITY / VENDOR NAME:

ADDRESS:

PHONE:

FAX:

WEB SITE:

## SELECT PREAPPROVED PLANNING ACTIVITY

Regional Hazard Analysis

Commodity Flow Surveys

CAMEO Software

EPA-Risk Management Planning

PLANNING ACTIVITY NARRATIVE (PLEASE SEE APPENDIX C FOR REQUIREMENTS OF NARRATIVE)

PLANNING BUDGET INFORMATION (PROVIDE DETAILS FROM BELOW ON A SEPARATE ATTACHED BUDGET NARRATIVE – SEE APPENDIX D)

CONTRACTOR - Attach Scope of Work in Narrative

CONTRACTOR TRAVEL

CONTRACTOR LODGING/PER DIEM/CAR RENTAL FACILITY RENTAL - TOTAL

ACTIVITY SUPPLIES - TOTAL

ACTIVITY EQUIPMENT RENTAL/PURCHASE - TOTAL COST ESTIMATE TRAVEL EXPENSES PER PERSON:

- Lodging
- Travel/Per Diem/Car Rental

Total Cost 80% + 20%:

OTHER (SPECIFY):

TOTAL 80% FEDERAL FUNDS REQUESTED:

20% Non-Federal Match:

Estimated Date of Project Start

mm/dd/yyyy: \_\_\_\_\_

# SECTION 2 – TRAINING ACTIVITY REQUEST

**ACTIVITY NAME:**

**ACTIVITY / VENDOR NAME:**

**ADDRESS:**

**PHONE:**

**FAX:**

Yes - COURSE LOGISTICS SUPPORT REQUESTED FROM DHSEM (CHECK ALL THAT APPLY)

Registration on [www.preparingnewmexico.org](http://www.preparingnewmexico.org) Local approval of registrations for attendance Verification of completion of course pre-requisites

No - COURSE LOGISTICS PROVIDED BY OTHER AGENCY. Participants will register at (Provide registration contact information . web address, phone number, mailing address):

**SELECT TRAINING ACTIVITY (APPENDIX A CONTAINS A LIST OF ALLOWABLE ACTIVITIES)**

- Hazmat Challenge HOTZONE
- International Association of Fire Chiefs (IAFC) International Hazmat Conference Fire
- Department Instructors Conference
- National Association of SARA Title III Program Officials (NASTTPO) Conference
- Hazmat/LEPC Regional Conference
- Regional Hazmat Workshops/Training/Conferences Regional/Local Hazmat Preparedness Conferences Hazmat Planning Conferences
- Annual Hazmat Workshop
- Other \_\_\_\_\_

**TRAINING ACTIVITY NARRATIVE (PLEASE SEE APPENDIX C FOR REQUIREMENTS OF NARRATIVE)**

**TRAINING BUDGET INFORMATION (PROVIDE DETAILS FROM BELOW ON A SEPARATE ATTACHED BUDGET NARRATIVE – SEE APPENDIX D)**

**NUMBER OF INSTRUCTORS:** \_\_\_\_\_

**ANTICIPATED NUMBER OF STUDENTS:** \_\_\_\_\_

**Estimated Date of Training**

**mm/dd/yyyy:** \_\_\_\_\_

***NOTE:** Please provide cost for two participants in the budget and identify the total number of preferred participants in the narrative.*

**INSTRUCTOR FEE**

**INSTRUCTOR TRAVEL**

**INSTRUCTOR LODGING/PER DIEM/CAR RENTAL FACILITY RENTAL - TOTAL**

**COURSE SUPPLIES - TOTAL**

**COURSE EQUIPMENT RENTAL/PURCHASE - TOTAL COST ESTIMATE EXPENSES PERSON:**

- Registration
- Lodging
- Travel/Per Diem/Car Rental

**OTHER (SPECIFY):**

**Total Cost 80% + 20%:**

**TOTAL 80% FEDERAL FUNDS REQUESTED:**

**20% Non-Federal Match:**

# SECTION 3 – EXERCISE REQUEST

**EXERCISE NAME**

**SITE NAME AND PHYSICAL ADDRESS:**

**ARE YOU REQUESTING STAFF SUPPORT FROM NM DHSEM FOR ACTIVITY?**  Yes  No

If YES, specify:

**ANTICIPATED NUMBER OF PARTICIPANTS:**

**DATE, TIME AND DURATION OF EXERCISE:**

**HOST OF EXERCISE:**

**LIST PARTICIPATING AGENCIES/JURISDICTIONS:**

**EXERCISE TYPE:** (APPENDIX B CONTAINS A DESCRIPTION OF EXERCISES HMEP CAN COVER)

Table Top (TTX)  
  Drill  
  Game  
  Functional Exercise (FE)  
  Full Scale Exercise (FSE)

**Exercise Activity Narrative** (PLEASE SEE APPENDIX C FOR REQUIREMENTS AND EXAMPLE)

**Exercise Budget Information** (PROVIDE DETAILS FROM BELOW ON A SEPARATE ATTACHED BUDGET NARRATIVE – SEE APPENDIX D FOR REQUIREMENTS AND EXAMPLE)

**CONTRACTOR** - Attach Scope of Work in Narrative (*Attach Copy of Exercise*)

**FEES/TRAVEL**

**EXERCISE SUPPLIES**

**OTHER (SPECIFY):**

**HOST** - Attach Scope of Work in Narrative (*Attach Copy of Exercise*)

**SALARIES/BENEFITS**

**FACILITY RENTAL**

**EQUIPMENT RENTAL/PURCHASE**

**EXERCISE SUPPLIES**

**OTHER (SPECIFY):**

**PARTICIPANTS**

Attach Budget for Each Agency Participant

**TRAVEL**

**LODGING/PER DIEM**

**Total Cost 80% + 20%:**

**OTHER (SPECIFY):**

**TOTAL 80% FEDERAL FUNDS REQUESTED:**

**20% Non-Federal Match:**

*NOTE: Please provide cost for two participants in the budget and identify the total number of preferred participants in the narrative.*

**Estimated Date of Exercise mm/dd/yyyy:** \_\_\_\_\_

# SECTION 4 – All Activities Combined Budget and Match

Description	Dollar Amount
Amount of HMEP 80% Federal Funds Requested for all activities	\$
Non-federal Match (20% of the total project cost which is the same as 25% of the federal share. Example; total project cost of \$1,000 = \$800 federal share + \$200 non-federal share)	\$

**MATCH can be in the form of cash or in-kind/soft contributions or both.**

**Cash Match, i.e., a cash contribution, can come from the coordinating entity's own funds (general revenue), cash donations from non-federal third parties (i.e. partner organizations), or from non-federal grants.**

**A cash match contribution can only be applied to your match requirement once it is expended on a cost or activity identified in your work plan.**

**In-Kind or Soft Match is a non-cash contribution of value provided by the area coordinating entity or by non-Federal third parties. In-kind match is typically the calculated value of personnel, goods, and services, including direct and indirect costs.**

**MATCHES must:**

**Be documented and verifiable in your records;**

**Not included as match contributions for any other Federal award (i.e. if you have already used funds to match another federal grant, they cannot also be applied towards activities);**

**Provided for in your approved budget;**

**Not Supplant already designated funds with Federal Funds.**

### Description of Match for all activities (All Match must be non-federal (e.g. cannot use EMPG, DHS, etc.))

Type of match (soft-match or cash, or both)	\$
Source (time of fire fighter, law enforcement, students, citizen, first responder, others, etc.)	\$
Other (describe, e.g. indirect cost)	\$
Salary and/or fringe benefit (rate x hours) *	\$
Facility space used for planning/exercise	\$
HMEP project related travel (planning/training) to be used as match	\$
Equipment used for training/exercise (describe)	\$
Other allowable match (describe)	\$
Total match (non-federal and not used for any other federal and/or state funded projects)	\$

APPENDIX A

TRAINING – ALLOWABLE ACTIVITIES

Mission-Specific and Competency Courses

Hazmat Incident Command System (ICS):

- ICS-100: Introduction to the Incident Command System
- ICS-200: Incident Command System for Single Resources and Initial Action Incidents
- ICS-300: Intermediate Incident Command System
- ICS-400: Advanced Incident Command System
- Industrial Fire Fighting- (rail yards, fuel transfer facilities, and ports)
- Confined Space Rescue
- Hazmat Basic Life Support/Advance Life Support – Medics respond to hazmat calls
- Chemistry for Emergency Responders
- Marine Operations - Ship-board rescue, firefighting, and hazmat
- Airport Rescue Fire Fighting (aircraft response and rescue)
- Explosive Ordinance Disposal/Explosives in transportation
- Radiological (sources in transportation, but not weapons of mass destruction)
- Tank Car Specialty
- Cargo Tank Specialty
- Intermodal Tank Specialty
- Marine Tank Vessel Specialty
- Flammable Liquid Bulk Storage
- Flammable Gas Bulk Storage
- Radioactive Material Specialty

**Notes:**

Examples of allowable activities provided are not intended to be all-inclusive, and the absence of a specific activity does not preclude its possible approval. Conversely, proposed activities will be reviewed for consideration of various factors, including cost-benefit of the specific implementation prior to approval.

Core Competency Courses

- Awareness
- Operations
- Technician
- Hazmat Incident Commander
- Hazmat Officer
- Hazmat Safety Officer
- Hazmat Refresher
- Hazmat Technical Decon Refresher
- Developing a Plan of Action
- Chemistry of Hazmat-Part I
- Chemistry of Hazmat-Part II
- Surveying a Hazmat Incident
- General Competencies
- Level A Personal Protective
- Level B Personal Protective
- Hazmat Level B Dress-out and Decon

ID of Methods and Procedures

Hazardous Materials Monitoring Refresher

Additional Training Courses

- CAMEO training
- The Hazmat IQ Training
- Hazmat for Emergency Management System (EMS)
- Hazmat for Dispatcher
- Hazmat Containers
- Hazmat Decontamination Drug Lab Training
- Containment and Control
- HAZWOPER Training
- Hazmat Air Monitoring Training
- Ammonia Training
- Tank truck rollover simulator
- National Incident Management System Levels 300 & 400
- Calibration Gas Kits for Hazmat Training (equipment)
- Hazmat Training Tools Package (geared towards hazmat training and exercises)
- Clandestine Lab Training
- Chlorine training props (equipment)
- The Paratech Light SU&R Rescue Strut System (equipment)
- Ammonia Safety and Emergency Response Training (ASERT)
- Hazardous Materials Outreach videos/Hazardous Material Team brochures
- Ethanol Training for First Responders
- Automobile Hazmat Fire Prop (equipment)



## Exercise – ALLOWABLE ACTIVITIES

Exercises within the scope of the HMEP grant fall under two categories:

**Discussion-based (seminar, workshop, game, tabletop):**

These exercises familiarize players with current plans, policies, agreements, and procedures, as well as provide a medium for developing new plans, policies, agreements and procedures.

Discussion-based exercises may involve single or multiple agencies and/or functions. Though they generally only cover broad topics, they involve little or no cost, modest time commitments and are a quick method to brief persons or organizations on unfamiliar topics.

**Operations-based (drill, functional, full-scale):**

These exercises are used to validate the plans, policies, agreements, and procedures solidified in discussion-based exercise. They can clarify roles and responsibilities, identify gaps in resources needed to implement plans and procedures, and improve individual and team performance. Operations-based exercises are characterized by actual reaction to simulated intelligence; response to emergency conditions; mobilization of apparatus, resources, and/or networks; and commitment of personnel, usually over an extended period of time. In these exercises, player action is designed to mimic reaction, response, mobilization, and commitment of personnel and resources in real time play. Operations-based exercises are usually funded under the HMEP training grant

## APPENDIX C

# ACTIVITY SCOPE OF WORK NARRATIVE

### NARRATIVE SHOULD INCLUDE THE FOLLOWING DETAILS

PLEASE COMPLETE THE FOLLOWING NARRATIVE AS A WORD DOCUMENT FOR EACH INDIVIDUAL ACTIVITY.

- Organization and Points of Contact Information
- Planning and Training Needs Assessment

Describe the current capacity and any areas of deficiency as it concerns preparedness for the transportation of hazardous materials. This may include:

- 1) A discussion of whether the applicant has identified a need to assess transportation flow patterns of hazardous materials within the State, or between the State and another state; and
  - 2) Providing the number of hazmat preparedness plans that need updating.
  - 3) Describing the location and need for exercises to be conducting that involve preparation for response to incidents involved in the transportation of hazardous materials.
  - 4) Providing the number of responders needing training and the number of persons currently trained in the different disciplines of response functions (e.g., number of firefighters, EMTs, EMSs that need training). Provide a scalable request for two participants up to the total number preferred and include justification for why sending additional participants will benefit the program.
  - 5) Narrative Description, Justification, Scope, Purpose, Duration of Planning or Training Activity
- Project / Activity Dates and Times
  - Scope of Work Narrative, Budget and Budget Narrative for each activity

#### Example Activity Narrative (Word)

20XX Grant Year 20XX FDIC

NM HMEP Grant Narrative

NAME of LEPC or Fire Department

**Submitting agency:** ACME Fire Department

**Date of submission:** MM/DD/20YY

**Project contact:** Jim Beam

**Phone:** 505-123-4567 / **cell:** 505-123-4567

**Fax:** 505-123-4568

**Email:** ACME@ACME.org

Project request: Reimbursement of the cost associated with attending the 20YY FDIC Conference.

#### Narrative

The ACME Fire Department (AFD), Hazardous Materials (Haz Mat) Regional Response Team (RRT), has an agreement with the State of New Mexico to automatically respond to any level 2 Haz Mat call within the New Mexico State Police District XX, and on request by the State of New Mexico Department of Public Safety anywhere in the State.

The AFD would like to attend the 20YY Fire Department Instructor Conference (FDIC) in Indianapolis, IN. We would like to send X persons. This is the largest fire instructor conference in the USA. This will be held in April 8-13 20XX. This would be a great opportunity to keep up with the latest firefighting methods and tactics, to check out the newest equipment, and improve our instructors. We would like to send X persons: which would fit in one large rental vehicle, and place 2 people in one room to keep the cost per person as low as possible.

**The AFD applies for a grant of \$12,428.00.** This will be an 80%/20% grant with the 20% to be paid by the AFD. This would be \$2,485.60 which will be offset by the salary cost carried by the AFD.

#### Description

Receipts for all items will be provided after the training. We are applying for reimbursement of the cost of;

Registration fee of \$1,100/person. This includes two days of hands-on training.

The conference is 6 days, with travel it is 8 days, this means that every attendant needs to be covered by at least 48-hours of overtime. AFD online personnel work a 48-hour on and 96-hour of schedule. For X persons this is an estimated \$7,424.00.

Lodging. Two rooms (two persons per room). At \$1,400 per room for 7 nights.

Per Diem for 8-days at the rate of \$45.00/day. A 20% (or \$9.00) will be added for tips. Max total \$54.00/day. They will be leaving on Sunday and return on Sunday. (Please See Note\*)

Round-trip flight from Albuquerque to Indianapolis, IN. There will be additional luggage fees since some attendants have to bring their firefighting gear for the hands-on training part.

A large rental vehicle (due to the luggage mentioned above) is needed for local transportation, with added fuel and parking cost.

\*Please note that the amounts given in this example are for demonstration only and your local government may have different requirements for meal Per Diem and other expenses while traveling.

**APPENDIX D**

**ACTIVITY BUDGET NARRATIVE**

- BUDGET NARRATIVE SHOULD INCLUDE THE FOLLOWING DETAILS (SEE BELOW FOR SAMPLE)
- PLEASE COMPLETE THE FOLLOWING BUDGET NARRATIVES AS A EXCEL DOCUMENT.
- Lodging Description
- Per diem per night
- Registration Fee
- Flight Cost
- Luggage fees
- Rental car
- Total cost project
- Total Federal Funds Requested
- 20% match to be paid
- Total activity expenses (Requested + 20% match)

**Grant request AFD 20YY FDIC Conference**

Item	Cost each	Quantity	Grant request
Lodging Indianapolis, IN 7 nights, 2 person per room	\$1,400.00	2	\$2,800.00
Per diem, 8 days at \$54.00	\$432.00	4	\$1,728.00
Registration Fee	\$1,100.00	4	\$4,400.00
Flight, to Indianapolis, IN With extra luggage fees	\$700.00	4	\$2,800.00
Rental SUV or van because of firefighting gear	\$700.00	1	\$700.00
<b>Total cost project</b>			<b>\$12,428.00</b>
Type of match (soft-match or cash, or both)	<b>CASH</b>		
Source (time of fire fighter, law enforcement, students, citizen, first responder, others, etc.)	<b>Fire Fighter</b>		
Other (describe, e.g. indirect cost)			
Salary and/or fringe benefit (rate x hours) *			
Facility space used for planning/exercise			
HMEP project related travel (planning/training) to be used as match			
Equipment used for training/exercise (describe)			
Other allowable match (describe)			
<b>Total 80% Federal Funds Requested</b>			<b>\$9,942.40</b>
<b>20% to be paid by soft or hard match</b>			<b>\$2,485.60</b>
<b>Total activity expenses (80% + 20% match)</b>			<b>\$12,428.00</b>

## APPENDIX E

### Overtime and Backfill (OTB) Reimbursement and Volunteer Stipend Guidance

**Effective: October 2020**

#### **PURPOSE:**

Guidance Regarding Overtime/Backfill Reimbursement and Emergency Responder Volunteer Stipend

#### **SCOPE**

This guidance applies to the Pipeline and Hazardous Materials Safety Administration's (PHMSA) recipients of the Hazardous Materials Emergency Preparedness (HMEP) grant.

#### **GUIDANCE**

Generally, overtime and backfill expenses are permitted under this grant in order to perform allowable HMEP training and exercise activities. To be eligible for any form of personnel time reimbursements, the individual's employing department must have experienced an actual cost beyond normal operational personnel expenses. Qualified expenses may include overtime, backfill or loss of salary/compensation by the individual attending a grant eligible activity or backfilling for someone attending an eligible activity. Backfill, overtime and stipend reimbursements must be supported by actual payroll records.

The following limitations apply to this guidance:

- PHMSA will allow HMEP recipients to request up to 30% of its award for backfill, overtime and stipend costs.
- Overtime to attend training conferences or symposiums will not be covered.
- Planning activities will not be considered for overtime, backfill or stipends.
- Course instructors and administrative staff are not eligible to be reimbursed under this guidance.

## APPENDIX E (Continued)

**STIPULATIONS FOR INCURRING COSTS:** HMEP recipients must have these costs preapproved prior to incurring the costs. Grant recipients must provide PHMSA with an internal management plan to ensure adequate oversight for these costs prior to the activity occurring. Grant recipients must retain a list of all individuals involved in these costs and their salary (individual trained and individual backfilling). A training record and actual payroll records must be maintained for all responders who receive overtime, backfill or stipends by name, county, training date(s) and the total amount paid to each individual volunteer for each individual training event.

### DEFINITIONS

**Overtime:** Expenses limited to the additional costs which result from personnel working over and above 40 hours (or the number of hours considered fulltime per week) of weekly work time as a direct result of HMEP-approved activities. Overtime shall not exceed 1.5 times an individual's hourly wage.

**Backfill-related Overtime,** also known as "overtime as backfill": Expenses are limited to overtime costs that result from personnel who are working overtime (as identified above) to perform the duties of other personnel who are temporarily assigned to PHMSA-approved activities outside their core responsibilities.

**Volunteer Stipend:** A nominal amount of money to be paid directly to a volunteer who attended an HMEP training activity. A stipend is nominal if it does not exceed 20 percent of what the fire department would otherwise pay a full-time firefighter to perform response services. Conditions for receiving a stipend must be in writing and training and/or exercise completion should be verifiable through certificates of completions and/or rosters.