

# AGENCY INFORMATION

Please make sure your Jurisdiction name is correct since this is how it will appear on your banking form. If the jurisdiction name is incorrect, please contact the BVP Help Desk as shown at the bottom of the left side menu.

## AGENCY INFORMATION

**Name:** FORT BEND COUNTY

**Agency Type:** County/Parish

**Government ID Number:** 441079079

**\* Tax Payer ID Number:** 

**9 Digit DUNS:** 081497075

**DUNS 4:**

**\* Unique Entity Identifier (UEI):**

**Number of Existing Population:** 889146

**Number of Existing Full Time Officers:** 614

**Number of Existing Part Time Officers:** 0

## OFFICE ADDRESS

**\* Address Line 1:**

1840 Richmond Pkwy

**Address Line 2:**

**\* City:**

Richmond

**State:**

TX

**\* Zip:**

77469-1477

CANCEL

SAVE

# AGENCY CONTACTS

Please verify your agency contact information.

*Note:* The role of Primary Point of Contact (POC) is critical to the success of this program. The POC will be required to review and approve the online application and all requests for payment. You will also be making various assurances and certifications with respect to key program guidelines and requirements. **If you feel these responsibilities exceed your authority, please STOP at this point and resume once your authority has been more clearly established.** If you are the Chief Executive, then you will also be acting as the Primary Point of Contact for your jurisdiction.

## ASSOCIATED USER INFORMATION [HIDE](#)

Name ↕	User Id ↕	Phone Number	Email ↕
Manuel Zamora	manuel.zamora@fortbendcountytexas.gov	(281) 341-4616	manuel.zamora@fortbe
Elizabeth Signorotti	elizabeth.signorotti@fortbendcountytexas.gov	(281) 341-8573	elizabeth.signorotti@fo

## CONTACTS

 Chief Executive Officer

\* First Name:

KP

\* Last Name:

George

\* E-mail:

FBC.Judge@fortbendcountytexas.gov

**Fax:**

(281) 341-8609

**\* Phone:**

(281) 341-8608

 Chief Financial Officer

**\* First Name:**

Ed

**\* Last Name:**

Sturdivant


**\* E-mail:**

Ed.Sturdivant@fortbendcountytexas.gov

**Fax:**

**\* Phone:**

(281) 341-3760

 Point of Contact

**\* First Name:**

Manuel

**\* Last Name:**

Zamora

**\* E-mail:**

manuel.zamora@fortbendcountytexas.gov

**Fax:**

**\* Phone:**

(281) 341-4616

**OFFICE ADDRESS**

**\* Address Line 1:**

1840 Richmond Pkwy

**Address Line 2:**

**County:**

**\* City:**

Richmond

**\* State:**

TX ▼

**\* Zip:**

77469-1477

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# APPLICATION PROFILE



Application Profile



Application



NIJ Approved Vests



Submit Application

Please enter your application profile information.

## APPLICATION PROFILE

### Vest Replacement Cycle:

Under normal conditions, the number of years you allow an officer to wear body armor before it is replaced. 5

### Number of Emergency Replacement Needs:

Number of Emergency Replacement Needs cover vests that are potentially defective, vests that have been lost, stolen, or damaged, and vests needed as a result of unanticipated Number of Officer Turnover occurring within the last 3 to 6 months. It DOES NOT include tactical vests or routine agency needs for new or replacement vests unless those vests contain Zylon® and must be replaced immediately.

\* Number of Stolen or Damaged

\* Number of Officer Turnover

Required fields are denoted by \*.

SAVE

CANCEL

# MANAGE APPLICATION



Application Profile



Application



NIJ Approved Vests




Submit Application

Listed below is each of the vests which you included in your application. You may view, change or delete the information shown for each type of vests listed by clicking on its 'Model Name'. To add more vests to your application, please select the "Add Vests To Application" button. If all information is correct, please select the "Proceed To Submit Application" button to continue with the application process.

## APPLICATION PROFILE

<b>Participant</b>	FORT BEND COUNTY
<b>Fiscal Year</b>	2023
<b>Number of Agencies Applied</b>	1
<b>Total Number of Officers for Application</b>	614
<b>Number of Officers on Approved Applications</b>	614

## APPLICATION PROFILE

<b>Fiscal Year</b>	2023
<b>Vest Replacement Cycle</b> 	5
<b>Number of Officers</b>	614
<b>Number of Emergency Stolen or</b>	0

Replacement Damaged Needs ⓘ

Number of Officer Turnover 20

VIEW/UPDATE APPLICATION

Vests for 2023 Regular Fund

Model Name	Quantity	Specification	Gender	Unit Price	Total Cost
+ <a href="#">AXIIIA-1</a>	59	IIIA	M	\$850.00	\$50,150.00
+ <a href="#">AXIIIAF-1</a>	8	IIIA	F	\$850.00	\$6,800.00
<b>+ Grand Totals</b>	<b>67</b>				<b>\$56,950.00</b>

PROCEED TO REVIEW APPLICATION

ADD VESTS TO APPLICATION

# MANDATORY WEAR POLICY

Since 2011, the Department of Justice's BVP Program has included an application requirement to ensure that agencies receiving funding for reimbursement of body armor purchases have a written Mandatory Wear Policy for uniformed patrol officers in place. Your agency has applied for BVP funding and certified that a wear policy is in place. The Bureau of Justice Assistance requests that you provide a copy of your agency's Mandatory Wear Policy for vests which were reported.



## MANDATORY WEAR POLICY

[Mandatory Wear Policy File Upload](#)

## CURRENT UPLOADED MANDATORY WEAR POLICY

Upload Date	Upload User	Upload Comments	Action
05/09/2023 02:02:22 PM	elizabeth.signorotti@fortbendcountytexas.gov	See page 8: Body Armor	<a href="#">View</a>

## PREVIOUSLY UPLOADED MANDATORY WEAR POLICIES

Upload Date	Upload User 	Upload Comments 	Action
09/21/2022 03:46:15 PM	elizabeth.signorotti@fortbendcountytexas.gov	See page 10: Body Armor	<a href="#">View</a>
06/16/2021 11:23:13 AM	manuel.zamora@fortbendcountytexas.gov	See page 8, body armor	<a href="#">View</a>
04/07/2015 12:09:08 PM	robin.mcguire@fortbendcountytexas.gov		<a href="#">View</a>

# REVIEW APPLICATION



Application Profile



Application



NIJ Approved Vests





Submit Application

Below is the current status of your application. To add more vests to your application or to make modifications to your application, use either the 'Update Details' link in the 'Application Status' column or step 'Manage Application' in the left hand menu bar.

## APPLICATION PROFILE

<b>Participant</b>	FORT BEND COUNTY
<b>Fiscal Year</b>	2023
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## APPLICATION PROFILE

<b>Fiscal Year</b>	2023
<b>Vest Replacement Cycle</b> 	5
<b>Number of Officers</b>	614
<b>Number of Emergency Replacement Needs</b> <b>Number of Stolen or Damaged</b> 	0

Number of  
Officer  
Turnover

20

REVIEW BVP APPLICATION FOR FUNDING

Applicant	Quantity	Total Cost	Date Submitted	Application Status
FORT BEND COUNTY	67	\$56,950.00		Created <a href="#">Update Details</a>
Grand Totals:	67	\$56,950.00		

PROCEED TO SUBMIT APPLICATION

# SUBMIT APPLICATION



Application Profile



Application



NIJ Approved Vests



Submit Application

**PLEASE NOTE: Applications for funding may be submitted for the purchase of any armor that meets the established NIJ ballistic or stab standards ordered on or after April 1, 2023. Once the open application period closes, funding levels will be established and all applicants will be notified.**

## APPLICATION PROFILE

Participant	FORT BEND COUNTY
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Fiscal Year	2023
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Number of Agencies Applied	1
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Total Number of Officers for Application	614
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Number of Officers on Approved Applications	614
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## APPLICATION PROFILE

Fiscal Year	2023
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**Vest Replacement Cycle**



5

**Number of Officers**

614

**Number of  
Emergency  
Replacement  
Needs**



**Number of  
Stolen or  
Damaged**

0

**Number of  
Officer  
Turnover**

20

**SUBMIT APPLICATION FOR FUNDING FOR BVP APPROVAL**

**Application for Funding**

<b>Name</b>	<b>Quantity</b>	<b>Extended Cost</b>	<b>Tax, S&amp;H*</b>	<b>Total Cost</b>
FORT BEND COUNTY	67	\$56,950.00	\$0.00	\$56,950.00
Grand Totals	67	\$56,950.00	\$0.00	\$56,950.00
<b>Requested BVP Portion of Total Cost, up to:</b>				<b>\$28,475.00</b>

\* Total Taxes, Shipping and Handling Cost for each Application

**SUBMIT APPLICATION FOR BVP APPROVAL**

**Paperwork Reduction Act Notice**

Under the Paperwork Reduction Act, a person is not required to respond to a

collection of information unless it displays a currently valid OMB control number. We try to create forms and instructions that are accurate, can be easily understood, and which impose the least possible burden on you to provide us with information. The estimated average time for all components of a jurisdiction to complete and file this Application for Funding form is two hours. If you have comments regarding the accuracy of this estimate, or suggestions for making this form simpler, you may use the Suggestions e-mail option on this BVP web site, or you may write to the BVP, c/o Bureau of Justice Assistance, 810 Seventh Street NW, Washington, DC, 20531.