



EXPLOSIVE ORDNANCE DISPOSAL K9 PROGRAM

AGREEMENT BETWEEN THE STATE OF GEORGIA GEORGIA EMERGENCY MANAGEMENT AND HOMELAND SECURITY AGENCY

AND

AGENCY

ACKNOWLEDGEMENTS: Any Subrecipient receiving funding for the purpose of sustaining and maintaining an Explosive Ordnance Disposal (EOD) K9 Program agrees to comply with the following:

- A. Each EOD K9 team must certify annually utilizing the standards approved by the All-Hazard's Working Group.
- B. Each EOD K9 team must provide monthly statistical reports to the EOD K9 Program Manager.
- C. Each EOD K9 team must utilize the state of Georgia's response paging system when responding.
- D. Each EOD K9 team must participate in a minimum of five (5) training events per fiscal year.
- E. Each EOD K9 team must participate in a minimum of six (6) GEMA/HS requested events per fiscal year.
- F. If requested, each EOD K9 team must participate in any national or regional event deemed relevant by GEMA/HS EOD K9 Program Manager.
- G. Each EOD K9 Team must provide records requested by EOD K9 Program Manager.
- H. Notwithstanding and without waiving any other remedies available for the Subrecipient's failure to comply with the terms and conditions of this agreement, if the Subrecipient fails to meet its obligations, voluntarily or otherwise, as part of a GEMA/HS program, GEMA/HS will have the right, privilege and option to immediately terminate this Agreement. Failure to exercise the right of termination for previous occurrences or omissions will not act as a waiver for future noncompliance by the Subrecipient. Should GEMA/HS exercise the right, privilege and option to terminate this Agreement, the Subrecipient shall immediately transfer ownership of any HSGP grant funded vehicle(s) and related equipment purchased under this agreement to GEMA/HS or to whomever GEMA/HS shall designate, including the transfer of title, tag and related documents, and shall deliver and turn over possession and title of said vehicle(s) and related equipment, without cost, as directed by GEMA/HS.

GEORGIA EMERGENCY
MANAGEMENT AND HOMELAND
SECURITY AGENCY

SUBRECIPIENT

Signature

Signature, Authorizing or Highest
Official

Harlan Proveaux, Deputy Director

Printed Name and Title of Signatory

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