

Virginia State Police
State & Local Law Enforcement Equipment Procurement Program (1122 Program) Application for Participation

Agency Name:			
Postal Address:	City:	State	e:Zip:
Shipping Address:	City:	State	::Zip:
Type of Population Served: Municipality	City	County	Other (Please Specify):
Size of Population Served:			
Geographical Description: Suburban	Rural \square	Urban \square	Other (Please Specify)
If related to Homeland Security or Emergency Response, skip to Question 3.			
Total Number of Sworn Officers:			
A. Full Time Narcotics, including investigators B. Officers involved in part time narcotics activities (in addition to other departmental duties) C. Tactical Officers (SWAT, special operations, gang detail, include investigators) D. Air support officers (pilots, co-pilots, air observation/surveillance, etc.) 1.) How many Counter-Drug Task Forces does your department participate, contribute or support? To what extent? (special equipment, aircraft, off-road vehicles, etc.) 2.) Describe the drug problem in your jurisdiction and the strategy undertaken to confront the problem (this information provides justification to the Department of Defense that the property acquired under this program will be used by a bona fide law enforcement agency in the drug enforcement effort).			
3.) Explain how this request is related to Homeland Security and/or Emergency Response.			

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Agency Authorization (Person(s) Authorized to requisition/sign for equipment/supplies) Name Position: Position: Business Phone Number (inc. Area Code): FAX (inc. Area Code): Will the above person also be the "Accountable Officer" (who will take possession/sign for, and authorize payment)? ☐ YES☐ NO If "NO", please provide "Accountable Officer" information below. Name Position: ______ Position: _____ Business Phone Number (inc. Area Code): _____ FAX (inc. Area Code): ____ __(applying agency) will assure that any property received/acquired under the provisions of Section 1122 of the Defense Appropriations Act of 1990/94 will be used in Counter-Drug Activities, Homeland Security, and/or Emergency Response Enforcements. This application must be signed by the chief executive or designee of the requesting agency. It is optional for the application to be co-signed by an authorizing official of city/county government. In the event of a program staff change (accountable/requisition officer or agency chief executive) the Virginia State Point of Contact (SPOC) must be notified, in writing, identifying the replacement. The notification letter must be signed by the chief executive of the agency or designee. **Agency Chief Executive Authorizing Official** Signature (Optional) Signature (Required) Print Name Print Name Date Date Official Use Only ☐ Approved ☐ Disapproved Lieutenant Anthony J. Puckett, SPOC Date