

Print

Measure Z Application for Funding 2025 - Submission #38220

Date Submitted: 2/13/2025

MEASURE Z APPLICATION SUBMISSION

Agency Name*

Eureka Police Department

Mailing Address*

604 C Street

City*

Eureka

Zip*

95501

Contact Person*

Rachel Sollom

Title*

Police Operations Analyst

Phone Number*

7074414296

Email*

rsollom@eureka.cagov

Project Title*

Purchase of Enhanced Safety Equipment

Funding Available

The estimated amount of Measure Z funding available for FY 2025-26 is \$1.3 million.

1. Amount of Measure Z Funding Requested For FY 25-26*

31949.98

Agency Priority

1 - Top Priority



Agencies are encourage to submit one project per application. If your agency is submitting more than one application, please rank this application in terms of your agency's priority here.

SUMMARY OF EXPENSES

Item	\$ Amount	% of Total
Salaries (wages)	Salaries Amount*	Salaries %*
	<input type="text" value="0.00"/>	<input type="text" value="0"/>
Benefits	Benefits Amount*	Benefits %*
	<input type="text" value="0.00"/>	<input type="text" value="0"/>
Overhead and Occupancy (Administrative, Rent, Utilities, Phones, etc.)	Overhead/Occupancy Amount*	Overhead/Occupancy %*
	<input type="text" value="0.00"/>	<input type="text" value="0"/>
Equipment/Supplies/Services	Equip./Services/Supplies Amount*	Equipment/Services/Supplies %*
	<input type="text" value="31949.98"/>	<input type="text" value="100"/>
Transportation/Travel	Transportation/Travel Amount*	Transportation/Travel %*
	<input type="text" value="0.00"/>	<input type="text" value="0"/>
Fixed Assets	Fixed Assets Amount*	Fixed Assets %*
	<input type="text" value="0.00"/>	<input type="text" value="0"/>
TOTAL	Total Amount of Application*	TOTAL 100%
	<input type="text" value="31949.98"/>	

ENTITY TYPE*☐

Humboldt County Department

☐

Contract Service Provider to Humboldt County

☒

Local Government Entity

☐

Private Service Provider

☐

Non-Profit Service Provider

☐

Other (please describe)

ENTITY TYPE

If you selected other, please briefly describe the entity you represent.

Is this application a renewal or related to a project that has been funded by Measure Z in the past? *

No 

If you checked "yes" please include the following:

1. a report detailing results from the most recent year the project was funded, and:
2. a completed Staffing Report detailing when the funded positions were filled during the most recent year you received funding for this project.

These documents must be uploaded in the "Required Attachments" section of this application.

Describe how the scope of your proposal fits the intent of Measure Z. Specifically, how will it maintain and improve public safety and essential services?*

Eureka, located along the isolated northern coast of California, is the largest city in three counties and serves as the vital regional hub for commerce, transportation, tourism, healthcare, government, and social services. With a residential population of more than 25,000 serving as the county seat sees a day time population of approximately 60,000. Eureka is considered a small city with big city issues surrounding crime, homelessness, drug addiction, and other social behaviors which create dangerous encounters for the community and the officers of the Eureka Police Department. As a whole our community has seen a significant increase in mental health related calls involving individuals in crisis. Some of these individuals are armed with weapons causing significant danger to the community. It is the goal of the Eureka Police Department to implement progressive programs and approaches to individuals in crisis and utilizing various de-escalation strategies, these types of incident still have a higher potential of physical harm to officers, the involved individual, and the community at-large. The Eureka Police is seeking to utilize one-time Measure Z funding to purchase enhanced safety equipment to increase the safety for Patrol Operations and our specialty units. Often in these situations' subjects are highly agitated, barricaded, and armed. This equipment will allow for safer operations utilizing our Crisis Negotiation Team and others to peacefully resolve these incidents. The equipment we are seeking to purchase is ballistic blankets, breaching kits, and ballistic shields. The concept of utilizing ballistic blankets and ballistic shields gives involved officers effective cover and concealment. This in turn gives officers more time to utilize other less-lethal options versus lethal options. Besides providing officers more time to make decisions, ballistic blankets and ballistic shields physically protect officers from firearms rounds or other weapons used against them. A breaching kit includes a halligan, ram, bolt cutters, and sledge hammer. These tools are used to gain access to residences, vehicles, and to defeat other barricaded situations. These are standard equipment for Law Enforcement operations and we are looking to expand the availability of these tools to our officers and special teams.

Please provide a brief description of the proposal for which you are seeking funding.*

The Eureka Police Department is seeking funding to purchase two ballistic blankets, two breaching kits, and two ballistic shields.

How have you developed a plan for sustainability, including diversification of funding sources, for your proposal to carry on without reliance on future Measure Z funds? Please provide detail of your plan for sustainability here.*

Purchasing of these items will be a one-time purchase. Commonly the estimated usefulness of a ballistic blankets is five years. With ballistic shields and breaching equipment is approximately ten years.

If this request is for the continuation or expansion of an existing program/service, what is the current source of funding for that program/service?*

This will be a one-time purchase and is only an expansion on equipment in which the department has a limited quantity.

If you are awarded Measure Z funds, how do you plan to leverage these funds to secure additional grants, contributions or community support? *

Ballistic blankets, ballistic shields, and breaching kits would be utilized during critical incidents which greatly reduces negative outcomes for officers, the involved individual, and the community at-large. These tools would assist in the de-escalation process as officer strive to attain voluntary compliance during critical incidents. Furthermore, these tools will assist in working towards the community's expectation of "everyone goes home."

Will this proposal require new or expanded activity on the part of another entity to be fully functional and effective? If so, name that entity and describe what that participation would look like. *

No new or expanded activity will be required for this.

Are there recurring expenses associated with this application, such as personnel cost? *

No

If you checked yes, please detail those expenses here.

Please note, the Citizens' Advisory Committee in May, 2023, adopted a stance that it would not recommend funding for new, ongoing county positions.

REQUIRED ATTACHMENTS

Be sure to include the following with your application.

Prior Year Results

If your request is a continuation of a program funded with Measure Z in prior fiscal years, please provide the results of implementation. (one page maximum)

Upload Prior Year Results Attachment

No file chosen

Program Budget

[Download the budget narrative](#), then upload using the button at right.

Upload Program Budget Attachment*

Measure Z Proposed Budget Template - FY 2025-26.xlsx

Staffing Report

If your request was previously funded, please [download and complete the staffing report](#), then upload it using the option provided here.

Upload Staffing Report Attachment

No file chosen

Letters of Support

If you have letters of support from members of the community you can upload them here.

Upload Letters of Support

No file chosen

I declare under penalty of perjury under the laws of the State of California that the above statements and all attachments are true and correct.

Date*

2/13/2025

08:45 AM

Signature*

Rachel Sollom

Type Approving Official's Name

Exhibit E - Proposed Budget

Agency Name:	Eureka Police Department	Address:	604 C St Eureka CA 95501
Coordinator/Contact:	Rachel Sollom	Phone:	#####

Descriptions	Requested Budget	Current Quarter Costs	Total of Prior Quarter Costs	Remaining Balance
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A. Personnel Costs

Title:				
Salary (separate from benefits cost)				0.00
Benefits				0.00
Duties Description:				
Title:				
Salary (separate from benefits cost)				0.00
Benefits				0.00
Duties Description:				
Title:				
Salary (separate from benefits cost)				0.00
Benefits				0.00
Duties Description:				
Salaries Subtotal	0.00	0.00	0.00	0.00
Benefits Subtotal	0.00	0.00	0.00	0.00
Total Personnel:	0.00	0.00	0.00	0.00

B. Overhead and Occupancy Costs (Rent, Utilities, Phones, Administrative etc.)

Title:				
Description:				
Title:				
Description:				
Total Overhead and Occupancy Costs:	0.00	0	0	0

C. Equipment/Supplies/Services (Equipment, Supplies and Services should be separate)

Title: Equipment				
equip patrol operations and specialty units. Normal use				
Description: greater then five years.	31,949.98			
Title:				
Description:				
Equipment Subtotal:	31,949.98	0	0	31949.98
Title: Supplies				
(Please be detailed. These expenses are generally under				
Description: \$200, depleted or consumed within 1 year)				
Title:				
Description:				
Supplies Subtotal:	0.00	0	0	0
Title: Services/Other Operational Costs				
(Please be detailed. These expenses are generally professional or				
Description: contracted services, or other expenses that are not equipment or				
Title:				
Description:				
Services/Other Subtotal:	0.00	0	0	0
Total Equipment/Supplies/Services:	31,949.98	0	0	31949.98

D. Transportation/Travel (Local and Out-of-County should be separate)

Title: Local Travel				
Description: Describe local travel and connection to your project				
Title: Out of County Travel				
Description: Describe out of county travel and connection to your project				
Total Transportation/Travel Costs:	0.00	0	0	0

E. Fixed Assets (According to your agency's definition of a fixed asset)

Title:				
Description:				
Title:				
Description:				
Total Fixed Asset Costs:	0	0	0	0

Totals	31,949.98	0.00	0.00	31,949.98
Requested Budget		Current Quarter Costs	Prior Quarter Costs	Remaining Balance