

# 2026 MICHIGAN PUBLIC SAFETY CRITICAL INCIDENT MAPPING COMPETITIVE GRANT PROGRAM PARTNERSHIP AGREEMENT

between

**Michigan State Police (MSP)**

**Grants and Community Services Division (GCSD)**

hereinafter referred to as the "Department"

and

Genesee County

324 Saginaw Street

Flint, Michigan 48502

Genesee County Critical Infrastructure Mapping Project (1)

- I. **Date of Agreement:**  
The Agreement shall commence on April 1, 2026.
- II. **Agreement Amount:**  
The Agreement amount is \$12,551.
- III. **Agreement Purpose:**  
As pursuant to Public Act 22 of 2025, Article 14, Part 2, Sec. 803, the purpose of this Agreement is for the MSP GCSD to fund counties in their development of critical incident mapping.

Funds shall only be used to implement critical incident mapping that satisfies all of the following:

1. Is compatible with platforms and applications used by local, state, and federal public safety officials.
2. Does not require the purchase of additional software for use.
3. Is provided in a printable format.
4. Is verified for accuracy through a walk-through of a building and grounds.
5. Is oriented true north.
6. Includes accurate floor plan information overlaid on current aerial imagery of a building.
7. Includes site-specific labeling that matches the structure of the building, including room labels, hallway names, external door or stairwell numbers, locations of hazards, key utility locations, key boxes, automated external defibrillators, and trauma kits.
8. Includes site-specific labeling that matches the building grounds, including parking areas, athletic fields, surrounding roads, and neighboring properties.
9. Includes a gridded overlay with x/y coordinates.
10. Includes information that best assists first responders in an emergency, including, but not limited to, the following information:
  - a. Building numbers.
  - b. Floors.
  - c. Suite designations.
  - d. Room numbers.
  - e. Other available relevant location information for each building.

IV. Agreement Signatories:  
The Authorized Official's signature below represents the county's legal acceptance of this Agreement.

Department Authorized Official	Title of Authorized Official
Signature	Date
County Authorized Official	Title of Authorized Official
Signature	Date