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| **This section is for State use only.** |
| Title |  |
| Jurisdiction |  |
| FEMA Disaster No. |  |
| Application Type  | ☐ Standard Hazard Mitigation Grant Program (HMGP)☐ 5 % Initiative☐ 7% Planning |
| Eligible Supplicant | ☐ State☐ Private Non-profit☐ Local Government |
| Community NFIP Status | ☐ Participating☐ Non-participating☐ Recognized Indian Tribe or Tribal Organization | CID # |  |
| Support Documents | ☐ Conforms with State HMP☐ In Declared Aea☐ Statewide |
| State Signature |  | Date |  |

Hazard Mitigation Assistance (HMA) Grant Funding Application

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| **1.0 PLAN/PROJECT IDENTIFICATION**  |
| 1.1 Grant Type  | ☐ Hazard Mitigation Grant Program (HMGP) |
| 1.2 Title  | 1.2a | 1.2b ☐ Project☐ Plan |
| 1.3 Application Year  |  |
| 1.4 Location of Project Site and Jurisdiction  |  |
| **2.0 APPLICANT IDENTIFICATION**  |
| 2.1 Entity making Application  |  |
| 2.2 Eligibility  | ☐ State Agency ☐ Local Government or Tribe ☐ Private Non-Profit  |
| 2.3 Tax Identification  | 2.3a State  |  | 2.3b Tribal/Federal  |  |
| 2.4 Employer ID  | 2.4a EIN  |  | 2.4b DUNS  |  |
| 2.5 EO 12372  | Subapplication has been submitted in compliance with Executive Order 12372 (State ClearingHouse). ☐ Yes☐ No because it is not covered by EO 12372☐ No it has not been selected by state for review  |
| **Contacts**  |
|  | Contact #1  | Contact #2  |
|  | ☐ Mr. ☐ Ms. ☐ Mrs. ☐ Dr. | ☐ Mr. ☐ Ms. ☐ Mrs. ☐ Dr. |
| 2.6 Last Name  |  |  |
| 2.7 First Name, Middle Initial  |  |  |
| 2.8 Title  |  |  |
| 2.9 Agency  |  |  |
| 2.10 Address  |  |  |
| 2.11 City, ST Zip  |  |  |
| 2.12 Phones  |  |  |
| 2.13 Email  |  |  |
| 2.14 Web Address  |  |  |
| **Applicant Experience**  |
| 2.15 List other FEMA grants awarded to or managed by this entity  |  |
| 2.16 Federal Debt  | ☐ Yes. Details:☐ No. Parties to this application are not delinquent on any Federal Debt. |

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| **3.0 COMMUNITY IDENTIFICATION**  |
| 3.1 Community Name |  |
| 3.2 Federal Identification Processing Standard (FIPS)  | 3.2a NFIP CID  |  | 3.2b Congress  |  |
| 3.2c US Senate  |  | 3.2d State Representative  |  |
|  |
| **Mitigation Plan**  |
| 3.3 Is there an existing multi-hazard mitigation plan in compliance with 44 CFR Part 201 covering the applying entity?  | ☐ Yes☐ No (skip to Scope Of Work) |
| 3.4 Name of existing plan and Year Approved  |  |
| 3.5 Type of plan  | ☐ Multi-jurisdiction ☐ Multi-hazard ☐ Local Tribal |
| 3.5 How is this application plan or project related to existing plans, including FEMA- approved state plans?  |  |
| 3.7 Describe other related mitigation plans (include plan names)  |  |
| 3.8 Attachments  | ☐ Yes | Comments:  |
| **4.0 SCOPE OF WORK (SOW)**  |
| For Plans, skip to “For Plans” at field 4.10.  |
| 4.1 Type of Mitigation Activity (check all that apply)  | ☐ Biological☐ Chemical☐ Terrorist☐ Toxic☐ Substance☐ Dam/Levee ☐ Drought☐ Earthquake ☐ Fire | ☐ Crop Loss☐ Fishing Loss☐ Human Cause☐ Civil Unrest☐ Land Subsidence☐ Nuclear☐ Special Event☐ Other | ☐ Freeze☐ Flood☐ Severe Storm☐ Mud/Landslide☐ Snow☐ Ice☐ Windstorm☐ Hurricane☐ Tornado  |
| 4.2 Location of Site  | Latitude Longitude  |  |
| 4.3 Describe Construction  |  |
| 4.4 Responsible Managers and Contractors |  |
| 4.5 Residual Risk after completion |  |
| 4.6 Estimated time to complete project  |  |
| 4.7 Feasibility (attach engineering abstracts, schematics, life safety)  |  |
| 4.8 Long term maintenance plan and project useful life  |  |
| 4.9 Proposed Activity (include location and title of project or plan)  | Please attach a Scope of Work Narrative in .doc or .pdf format. Include two alternative activities. |
| **For Plans**  |
| 4.10 Type of Plan  | ☐ New Plan ☐ Update Existing Plan |
| 4.11 List Beneficiaries of Plan  |  |
| 4.12 Describe Staffing and estimated time to complete  |  |
| 4.13 Attachments  | ☐ Yes  | Comments:  |
| **Property Impacted. Complete this section for each property.** |
| 4.14 Disaster Declaration  | ☐ YesDatesName☐ No |
| 4.15 Property Owners  |  |
| 4.16a Address of Property to be mitigated: Property Map, Parcel, and Lot # Include NFIP Policy Numbers for Loss Status  | 4.16b☐ NFIP Policy☐ FMA Repetitive Loss Policy☐ FMA Severe Repetitive Loss Policy |
| 4.17 Property Tax ID  |  |
| 4.18 Legal Description  | ☐ Unimproved land☐ Public☐ Non-residential☐ Manufactured home☐ Multi-Family Dwelling (5 or more Units)☐ Single family  |
| 4.19 Is this property currently substantially damaged?  | ☐ Yes ☐ No |
| 4.20 Property Action  |  ☐ Acquisition ☐ Safe Room ☐ Demolition ☐ Wind Shelter ☐ Relocation ☐ Seismic ☐ Elevation ☐ Wildfire ☐ Flood Proofing ☐ P804 Wind Advanced A B-ES I ☐ Mitigation ☐ Other☐ Reconstruction |
| 4.21 Elevation in feet the lowest floor will be raised above Base Flood Elevation  |  |
| 4.22 Unit Types impacted  |  ☐ Apartment ☐ Basement ☐ Lobby ☐ Lot ☐ Floor ☐ Hangar ☐ Office ☐ Pier ☐ Room ☐ Slip ☐ Suite ☐ Other  |
| 4.23 Foundation  |  ☐ Basement ☐ Slab on Grade ☐ Crawl space ☐ Vacant Land ☐ Pier, Pile, Post or Column ☐ Other |
| 4.24 Flood Zone (ie. A, AE, V, etc.) |  |
| **5.0 COSTS**  |
| 5.1 Cost – Benefit Analysis Method  | **Attach report in .xls or .pdf format. The digital export must also be submitted. FEMA BCA Toolkit Download:** <https://www.fema.gov/benefit-cost-analysis>☐ FEMA Benefit-Cost Analysis tool (BCA)☐ Pre-calculated Benefits☐ Substantial Damage in Special Flood Hazard Area (SFHA) – acquisition only ☐ Other  |
| **Schedule**  | **Include all tasks necessary to implement this mitigation activity, the estimated timeframe for each task, and who will complete it. Attach a separate .doc, .xls, or .pdf if preferred.**  |
| 5.2 Description of Task  | Starting Point  | Unit of Time  | Duration  | Completion Point  | Responsible Entity  |
| *Example: Inspection*  | *Day 15*  | *Days*  | *21 Days*  | *Day 36*  | *Housing Dept.*  |
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| **Cost Estimate**  |
| 5.3 Item  | Budget Class  | Unit Quantity  | Unit of Measure  | Unit Cost  | Estimate  | Running Total  |
| *Example: Fence Post*  | *Material*  | *60*  | *8’*  | *$7.85*  | *$471*  | *$471*  |
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| **Subapplicant Management Cost** |
| 5.4 Requesting management cost? | ☐ Yes ☐ No |
| 5.5 Item  | Budget Class  | Unit Quantity  | Unit of Measure  | Unit Cost  | Estimate  | Running Total  |
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| **Cost Sharing**  |
| 5.6 Cost Estimate  | Dollar Amount  | Percentage  |
| 5.7 Federal Sources  |  |  |
| 5.8 Non-Federal Share  |  |  |
| 5.9 Non-Federal Funds  | 5.9a Agency  |  |
|  | 5.9b Funding Type  |  |
|  | 5.9c Amount  |  |
| 5.10 Attachments  | ☐ Yes  | Comments:  |
| **Evaluation: Community Rating System (CRS)**  |
| 5.11 CRS Rating |  |
| 5.12 Is the recipient of funds a cooperating technical partner (CTP)?  | ☐ Yes ☐ No |
| 5.13 Firewise Community  | ☐ Yes ☐ No |
| 5.14 International Building Codes Compliant  | ☐ Yes ☐ No |
| 5.15 National Fire Protection Association (NFPA) 5000  | ☐ Yes ☐ No |
| 5.16 Building Code Effectiveness Grading Schedule (BCEGS)  | ☐ Yes ☐ No |
| 5.17 Is this Plan or Project within an impoverished community?  | ☐ Yes ☐ No |
| 5.18 Community Benefits of Plan  |  |
| **Protection of Critical Facilities**  |
| 5.19 Does this project protect any of the following?  | ☐ Hazardous Materials Facility☐ Emergency Operations Center☐ Power Facility☐ Water or Sewer Treatment☐ Communications☐ Medical Care☐ Fire Protection |
| 5.20 Attachments  | ☐ Yes | Comments:  |
| **6.0 Environmental and Historic Preservation (EHP)** |
| 6.1 Check all that apply | ☐ Ground disturbance☐ Impact on past use of historic or public site☐ Endangered or threatened species and critical habitats☐ Vegetation removed☐ Waterways within 200 feet☐ Dredging or disposal of dredged material☐ Located within 100- or 500-year flood zone☐ Altering water flow or drainage☐ Designated Coastal Zone☐ Site impact on 5 acres of farmland☐ Hazardous materials or contaminants disturbed or involved☐ Executive Order 12898 low income or minority populations in the project’s area of impact☐ Environmental requirements |
| 6.2 Historic Preservation  | Attach USGS 1:24,000 quadrangle displaying relationships of structures Attach photographs of any structures over 50 years old  |
| **7.0 ASSURANCES AND CERTIFICATIONS**  |
| 7.1 Part I: Assurances non-construction programs  | ☐ Complete☐ Incomplete☐ N/A |
| 7.2 Part II: Certifications Regarding Lobbying: Debarment, Suspension and Other Responsibilities Matters; and Drug Free Workplace Requirements  | ☐ Complete☐ Incomplete☐ N/A |
| 7.3 Part III: Disclosure of Lobbying Activities (Complete only if applying for a grant of more than $100,000.00 and have lobbying activities using non-federal funds.  | ☐ Complete☐ Incomplete☐ N/A |
| 7.4 Additional Attachments that may be required.  | ☐ Disclosure of Lobbying Activity☐ Historical Preservation Considerations for impacted properties☐ Model Acknowledgement of Conditions for Mitigation in SFHA ☐ Selecting Appropriate Mitigation Measures for Flood Prone Structures, FEMA 551 Model Deed Restriction ☐ Model Deed Restriction Language☐ Model Mitigation Offer☐ Notice of Voluntary Interest Sample 1 (Multiple Property Owners) ☐ Notice of Voluntary Interest Sample 2 (Single Property Owner)☐ Statement of Voluntary Participation for Acquisition of Property for Purpose of Open Space ☐ The National Flood Mitigation Data Collection Tool and RLP Viewer, FEMA 497C ☐ Property Assessment Information or Appraisal☐ Elevation Certificate☐ Non-federal share Commitment Acknowledgement ☐ Architectural Renderings for Historic Properties☐ Maintenance Agreement |