

# HMGP APPLICATION REVIEW

DR # \_\_\_\_\_ - \_\_\_\_\_

Effective May 2011

Date Received:	Application Review Date:
FEMA Reviewer:	

Application Requirements	Application Review	Verify		
		No	Yes	NA
Title/Brief Descriptive Project Summary		✓	✓	✓
1. Applicant (Organization)  <i>44 CFR 201.3(c)(1)</i> <i>44 CFR 201.4(a)</i>  <i>44 CFR 201.6(a)(1)</i>	<b>Verify</b> the jurisdiction or organization is an <b>eligible applicant</b> (Approved State HM and Admin Plan; local mitigation plan) A copy of the local mitigation plan approval letter must be attached. Is this consistent with your approved state HM and Admin Plan and where can the justification be found in that plan?			
2. Assurances  <i>HMA Guidance Part IV B</i> <i>44CFR 206.436(c)</i> <i>OMB A-102</i>	Ensure that a SF 424 or equivalent documentation is provided per project.			
3. Applicant Type <i>44CFR 206.434(a)</i>	If Private Non-Profit -- is there documentation showing legal status as a 501(C)? (Example - IRS letter) or Native American Tribal ID			
4. County/Parish  <i>44CFR 206.436 (c)(3)</i>	County/Parish in which the project is located..			
5. Congressional District(s)	Verify congressional districts for applicant and project. Maps: <a href="http://nationalatlas.gov/printable/congress.html">http://nationalatlas.gov/printable/congress.html</a>			
6. Federal Tax I.D. Number (EIN)	<b>Verify</b> the EIN number has been entered.			
7. FIPS Code  <i>NEMIS Required</i>	<b>Verify</b> the FIPS code is correct. Search by State & county: <a href="http://www.census.gov/geo/www/fips/fips65/">http://www.census.gov/geo/www/fips/fips65/</a>  Search by State: <a href="http://mcdc.missouri.edu/webrepts/commoncodes">http://mcdc.missouri.edu/webrepts/commoncodes</a>			
8. DUNS Number  <i>NEMIS Required</i>	<b>Verify</b> the DUNS number. <a href="http://ccr.dnb.com/ccr/pages/CCRSearch.jsp">http://ccr.dnb.com/ccr/pages/CCRSearch.jsp</a>			
9. NFIP Participation  <i>44 CFR 206.592(a)</i> <i>44CFR 9.3(b)(10)</i> <i>HMA Guidance Part III D. 7</i>	<b>Verify</b> the applicant is eligible and is compliant. (CID is not required.) If project located in a SFHA.			
10. CFDA	<b>Verify</b> that the correct CFDA is entered: 97.039			
11. Point of Contact  <i>44 CFR 206.436 (c)(2)</i>	<b>Assure</b> that all pertinent contact information is provided.			
12. Authorized Applicant Agent  <i>NEMIS Required</i>	<b>Verify</b> that the signature belongs to an authorized agent. "The chief elected official of a local government has signature authority, so for a county it would be the Chairman of the Board of County Commissioners and for a municipality it would be the Mayor (the exact title sometimes varies). Any local government may delegate this authority to a subordinate official (like a City or county Manager) by resolution of the governing body (the Board of County Commissioners or Board of City Commissioners). If a local government does delegate, it should provide us with a copy of the resolution by which the delegation is made."			
13. Endorsement Letter	<b>Assure</b> that a letter of endorsement signed by state for the project from the Grantee is included in the application.			
14. Benefit Cost	<b>Assure</b> that a BCA is attached and the BCR is 1.0 or above confirming			

<p>44CFR 206.436(c)(6) HMA Guidance Part IV G. HMA Guidance Part III D.3</p>	<p>that the project is cost effective. Review the BCA to ensure validity and all documentation is included. BCA not required on 5%.</p>			
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## Section I - Project Description

### A. Hazards to be Mitigated/Level of Protection

Application Requirements	Application Review	Verify		
		No	Yes	NA
<p>1. Type of Hazards the Proposed Project Will Mitigate:</p> <p>44 CFR 206.434(c)(5)(i) HMA Guidance Part IV H.1.1</p>	<p>Applicant may identify more than one.</p>			
<p>2. Identify the Type of Proposed Project</p>	<p>What type of mitigation is being proposed?</p>			
<p>3. Number of Persons Protected by this project</p>	<p><b>Assure</b> an explanation for the stated number of persons <b>protected</b> is included in the application. Also, if the project is a critical facility, the applicant needs to include the number of persons that will be in the facility during an event and may include the number of individuals dependent on services from that structure.</p>			
<p>4. Level of protection Statement</p> <p>HMA Guidance Part IV H.5</p>	<p><b>Assure</b> support documentation accompanies the application that verifies the stated level of protection. Should be stated in Narrative.</p>			
<p>5. Engineered Projects only (e.g. Drainage)</p> <p>HMA Guidance Part III D.4 HMA Guidance Part V A</p>	<p><b>Assure</b> that engineering checklist is attached.</p>			
<p>6. Life of the project</p> <p>BCA Required</p>	<p>If FEMA standard value (infrastructure, 50; elevation, 30; wind, 15; acquisition, 100) is not utilized, the applicant's support documentation should include justification of the value entered. For example, in a wind retrofit project, the product specifications should include product life.</p>			
<p>7. Public Notice</p>	<p>Has a public notice been enclosed in the application to assure that the public was notified of this pending project. Examples would include but are not limited to public meetings, press releases, news articles, internet references, legal notices.</p>			
<p>8. Policy: In lieu of BCA (for 5%)</p> <p>HMA Guidance Part III D.3</p>	<p>FEMA policy dated September 19, 1996 states that in lieu of a benefit cost analysis for 5% initiatives, the state <b>must</b> include a narrative that identifies the mitigation benefits and indicates that there is a reasonable expectation that future damage or loss of life or injury will be reduced or prevented.</p>			

### B. Project Description, Scope of Work, and Protection Provided (Must be Completed in Detail)

<p>1. Existing Problem</p> <p>44 CFR 206.434 (c)(5)(i)</p>	<p><b>Assure</b> the applicant provided a reasonable narrative that includes a description of the existing problem, location, source of the hazard and the history and extent of the damage.</p>			
<p>2. Type of Protection</p>	<p><b>Assure</b> the applicant provided a reasonable narrative regarding the type of protection that will be provided by the proposed project. How will the funding solve the problem?</p>			

<p>3. Scope of Work – For Proposed Project</p> <p>44 CFR Part 206.436 44CFR Part 206.434(c) HMA Guidance Part IV H.1.1</p>	<p><b>Assure</b> the project description, proposed scope of work and level of protection are sufficiently detailed and documented to determine eligibility based on HMGP regulations and guidance and explains how the proposed problem will be solved. The scope of work <b>must</b> include a narrative that identifies the mitigation benefits and indicates that there is a reasonable expectation that future damage or loss of life or injury will be reduced or prevented. (NOTE: The proposed project must be mitigation-- not maintenance.) <i>Does the proposed project solve a problem independently or constitute a functional part of a solution where there is assurance that the project as a whole will be completed (44 CFR 206.434(b)(4))?</i></p> <p><i>Does the proposed project address a problem that has been repetitive or that poses a significant risk to public health and safety if left unresolved (44 CFR 206.434(b)(5)(i))?</i></p>			
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### C. Alternative Actions

Application Requirements	Application Review	Verify		
		No	Yes	NA
1. No Action Alternative	<b>Assure</b> the applicant has discussed the impacts on the project area if “no action” is taken.			
2. Other Feasible Alternative Action  HMA Guidance Part IV H.1.1	<b>Assure</b> a <u>reasonable</u> alternative to the proposed project is provided. The alternative must be described in detail. What would the impact of the alternatives be? Lack of funding is not an acceptable alternative.			
3. Reason for Selection  44CFR206.434 (c)(5)(iii) HMA Guidance Part IV H.1.1	<b>Has the proposed project been determined to be the most practical, effective and environmentally sound alternative after consideration of a range of options (44 CFR 206.434(b)(5)(iii))? Narrative of the applicant’s decision making process.</b>			

### D. Maintenance Agreement

1. Signature  44 CFR 206.434(c)(5) HMA Guidance Part IV G	<b>Verify</b> authorized applicant’s agent has signed and dated the maintenance agreement, if applicable.			
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## Section II - Project Location

### A. Site

1. Physical Location 44 CFR 206.436(c)(3)	<b>Assure</b> the <u>address</u> , including the <u>street numbers</u> , (P.O. Box not acceptable), <u>zip code</u> , <u>latitude</u> and <u>longitude</u> are provided. <b>Must</b> be entered into NEMIS before submittal.			
2. Title Holder	<b>Assure</b> the titleholder’s name is provided (acquisition).			
3. Number of structures types affected	<b>Assure</b> the number and type of properties affected by the project is provided - Example: Drainage project that affects 250 homes, 29 businesses and 2 schools. What does the project protect?			
4.VPN (Part 80) (Voluntary Participation Notification)  44 CFR § 80.5(a)(3)	<b>Must</b> be signed by owner/co-owner ( Acquisition and Elevation projects only) *Copy of Power of Attorney is required if signed by third party			

44 CFR § 80.13(a)(4) 44 CFR § 80.13(a)(4)				
5. Substantial Damage Certificate	<b>Must</b> have signed and dated Certificate from Flood Plain Administrator, BCA not Required (Acquisition in floodplain only)			

**B. Flood Insurance Rate Map (FIRM) showing Project Site**

1. Copies of FIRM <i>HMA Guidance Part IV H.1.1</i>	<b>*Assure</b> a copy of the FIRM is included with the application and the project site clearly identified. The FIRM Panel number and Flood Zone must be included.			
2. Flood Hazard Boundary Map (FHBM) – not required if FIRM provided	Communities may not have a FIRM but do have a FHBM			

**C. City or County Map with Project Site and Photographs**

Application Requirements	Application Review	Verify		
		No	Yes	NA
<b>Application Requirements</b>	<b>Application Review</b>	No	Yes	NA
<b>Application Requirements</b>	<b>Application Review</b>	No	Yes	NA
1. City/Parish Map with Project Site  <i>44CFR206.434(b)(3)</i> <i>44 CFR 9.3(a)+(b)</i>	<b>*Assure</b> the "Project site" is clearly identified on the City/Parish/tribe map ( <b>this includes planning projects</b> ).			
2. Site Photograph  <i>HMA Guidance Part IV H.1.1</i> <i>Part IX A.4</i> <i>Region 6 Requirement</i>	<b>Assure</b> each photograph is clearly identified. The photos must be representative of the project area, including any relevant streams, creeks, rivers, etc. and drainage areas, which affect the project site or will be affected by the project. The front, back and both side angles is required for each structure.			

**Section III - Budget/Cost**

Review detailed budget summary sheet. (What support documentation justifies the budget? Is a vendor quote, professional estimate, i.e. engineer, architect, local building official, etc.?) Do all of the proposed budget items represent eligible and reasonable costs as outlined in the OMB Circulars? Provide a detailed line-item budget that is based on industry standards and specifies unit and/or lump sum costs. Line items should reflect elements identified in the scope of work. Ensure the applicant's costs are accurate, complete, and reasonable compared to industry standards. General policies for determining allowable costs are established in 44 CFR 13.22; exceptions to those policies are provided in 44 CFR 206.439.

**A. Cost Breakdown**

1. Labor/Materials  <i>44 CFR 206.436 (c)(5)</i> <i>OMB Circ. A-87</i> <i>A-122</i> <i>A-21</i> <i>HMA Guidance Part IV G.</i>	Need breakdown of description, hours, rate, and cost or lump sum labor cost.  Can be used for "in-kind" contribution as part of the 25% match. (Applicant must provide support documentation for in-kind match) Be sure to document in detail all wages and salaries charged for any in-kind contribution. No overtime wages can be used to satisfy "in-kind" match contributions.			
2. Fees Paid  <i>OMB Circular A-87</i> <i>Attachment B Section 9</i> <i>44 CFR 206.439</i> <i>OMB Circ. A-87</i> <i>A-122</i> <i>A-21</i>	Need breakdown of associated fees. Maintenance is not an allowable cost under HMGP. <ul style="list-style-type: none"><li>Contingency not allowable</li><li>Pre-award Cost only allowable after the date of declaration</li><li>Reference guidance for approvable cost</li></ul> <b>Verify</b> horizontal calculations are correct.			
<b>3. Total Estimated Project Cost</b>	<b>Verify</b> the vertical and horizontal calculations are correct.			

### B. Funding Sources (round figures to the nearest dollar)

Do the proposed sources of non-federal matching funds meet eligibility requirements? (Except as provided by Federal statute, a cost sharing or matching requirement may not be met by costs borne by another Federal grant.) 44 CFR 13.24 (b)(1).

1. Estimated FEMA Share	If FEMA's share is not 75%, assure actual amount is entered. It could be 50% or 35%, etc. of the total dollar amount of project.			
2. Duplication of Benefits	Assure that the application states that any duplication of benefits will be deducted. Only required for Acquisition, Relocation, and Elevation projects.			
3. Estimated Local Share  <i>44 CFR 13.24 (b)(6)</i> <i>HMA Guidance Part VI B.1</i> <i>HMA Guidance Part IV H.3</i>	May include all 3 sources, i.e. cash, "in kind" and global match, as long as the total is a minimum of 25%. Match cannot be derived from a federal agency except Federal funds that lose their federal identity. For example, CDBG funds.			
4. Total In-Kind  <i>44 CFR 13.24 (b)(6)</i>	Explanation of In-kind matches is required. Must include a cost breakdown of In-Kind matches.			
5. Total Global Match	Global match must 1) be a project funded 100% within the county/parish; 2) meet all the eligibility requirements of HMGP and 3) begin after the declaration date of the disaster. The global match is not required to be an identical project. Projects submitted, as global match for another project, must meet the same period of performance time constraints as HMGP program. 4) Must Meet requirements identified in approved Admin Plan			
6. Total Funding	Total must represent up to 100% of the 75% funds from FEMA and the 25% from the applicant.			
7. Funds Commitment  <i>NEMIS Requirement</i>	<b>Verify</b> that a funds commitment letter is signed and dated and entered into NEMIS.			

### C. Project Milestones/Schedule of Work

Application Requirements	Application Review	Verify		
		No	Yes	NA
Milestones (Work Schedule)  <i>44 CFR 206.436 (c)(7)</i> <i>FEMA Policy Memo</i> <i>NEMIS Required</i> <i>HMA Guidance Part IV G.</i>	<b>Assure</b> that the major milestones in the proposed project are provided <b>in 90 days increments</b> with an estimated time-line for the critical activities not to exceed a period of 3 years for performance. Quarterly reports should meet the expectations found in the milestones/schedule of work. (e.g. designing, engineering, permitting, procurement, installation, contracting, delays, project implementation, inspections, closeout, etc.)			

### Section IV - Environmental Review & Historic Preservation Compliance

1. Project Location <i>44 CFR 206.436(c)(3)</i>	Provide address and Lat/Long coordinates for each site. Include street/aerial map with project location() marked. See Section II, part B & C.			
2. Detailed project description , scope of work	What, how, and how many? Include dimensions (heights, depths, acreage etc.) location (interior vs. exterior; above or below; north, south, east, west) and details on all components of work (e.g, additional utilities, foundations, support wires, protective structures, increases in system capacities). Include any alternate properties. See Section I &II			
3. Project area/structure photographs	See Section II, Part C.			

4. Age of Structure	Indicate construction date of each structure. Attach SHPO* response if 45 years or older or if project is near historic resources.			
5. Ground Disturbance <i>HMA Guidance Part III D.6</i>	Does project affect undisturbed ground? If so, attach SHPO* response.			
6. Endangered Species <i>HMA Guidance Part III D.6</i>	Applicant should provide FEMA with copies of USFWS letters and response, if applicable to that state. Attach State Wildlife Department response letters.			
7. Water and Wetlands <i>HMA Guidance Part III D.6</i>	Attach U.S. Army Corps of Engineers response letter if project is in, near, or otherwise affects a water body or wetland. Attach response letters from state environmental quality department.			
8. Farmland Protection <i>HMA Guidance Part III D.6</i>	Attach letter from NRCS if project located n agricultural, rural, or undeveloped location.			
9. Floodplains <i>HMA Guidance Part III D.6.1</i> <i>44 CFR Part 9</i> <i>HMA Guidance Part III D.6</i>	Attach FIRM with project site(s) indicated. FIRM should include panel number and effective date. See section II, part B.  If project located within the floodplain, provide alternative actions (including “no action” alternative) and narrative rational for the decision to pursue the primary project. Attach letter from floodplain administrator.			
10. Environmental Justice for low income and minority populations <i>44 CFR 10</i>	Attach signed environmental justice statement			
11. Additional Documentation	If available and appropriate, attach environmental site assessments, biological assessments, H&H studies, drainage studies, preliminary engineering design plans etc.			
	*NOTE: Consultation letters are to be submitted to the SHPO in accordance with the state guidelines for 106 review submittals.			

# Wind Retrofit Worksheet

Application Requirements	Application Review	Verify		
		No	Yes	NA
Photos of each side of the building to be retrofitted.	<b>Assure</b> the photos are included in the application and that they are clearly identified.			

## A. Project Information

1. Building Name	<b>Assure</b> the information provided matches other entries in the application.			
2. Address	<b>Assure</b> the information provided matches other entries in the application.			
3. City, State & Zip	<b>Assure</b> the information provided matches other entries in the application.			
4. Owner/Applicant	<b>Assure</b> the information provided matches other entries in the application.			
5. Contact Person\ <i>Reg. 6 Requirement</i>	<b>Assure</b> the information is provided. The contact person will most likely be the same as provided. Flag if contact person is different than the POC.			

## B. Building Data (Needed for Benefit Cost Analysis)

1. Select Building Type	<input type="checkbox"/> Non-Engineered Wood <input type="checkbox"/> Non-Engineered Masonry <input type="checkbox"/> Manufactured Building <input type="checkbox"/> Lightly Engineered <input type="checkbox"/> Fully Engineered <input type="checkbox"/> Other	} <b>Assure</b> one is checked.			
2. Building Site (Miles Inland)					
3. Number of Stories Above Grade	<b>Assurance</b> options include: 1. Photos 2. Property Valuation Assessor Should be included in Project Description				
4. Construction Date	<b>Assure</b> the date of construction for the structure is provided.				
5. Total Floor Area (SF)  <i>Needed for BCA</i>	<b>Assurance</b> options include: 1. Insurance Policy (Declaration Page) 2. Tax Card 3. Appraisal Report				
6. Annual Maintenance costs (\$/year)  <i>BCA Required</i>	<b>Assure</b> dollar amount is provided				

## C. Building Value

1. Building Replacement Value	<b>Assure</b> support documentation is provided. Preferably: 1. Insurance policy (Declaration Page) 2. Public Works/Building Department 3. Property Valuation Assessor			
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## D. Building Contents

1. Contents Description	<b>Assure</b> content description is provided.			
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<b>Application Requirements</b>	<b>Application Review</b>	No	<b>Verify</b> Yes	N/A
2. Total Value of Contents	<u>Assure</u> value of contents is provided. Note: Up to 30% of Total Value of Building is the FEMA default value – no support documentation required. Otherwise, <u>assure</u> documentation, such as, insurance records, appraisals, purchase receipts, or estimates based on current market prices for similar contents are provided.			

**E. Displacement Costs Due to Wind (Needed for Benefit Cost Analysis)**

1. Rental Cost of Temporary Building Space (\$/sf/month)	<u>Assure</u> FEMA default is \$1.00 per square foot. Otherwise, support documentation, such as, rental cost from a realtor, copy of rental agreements, commercial rental ads or property management organizations is required.			
2. Other Displacement Costs (\$/month)	<u>Assure</u> FEMA default is \$500. Otherwise, support documentation, such as receipts or estimate, is required.			
3. Relocation Time Due to Project (months)				
4. Rental Cost During Occupant Relocation (\$/month)				
5. Other Relocation Costs (\$/month)				

**F. Value of Public Non-Profit Service**

1. Description of Services Provided				
2. Annual Budget of Public Non-Profit (applicant) Agencies	<u>Assure</u> the operating budget, <u>specifically for the building/project site</u> , is provided. In other words, not the applicant’s entire city/county/school district budget. The annual budget <u>may</u> be verified at the following website: <a href="http://www.nationmaster.com">http://www.nationmaster.com</a>			
3. Post Disaster Continuity Premium (\$/day)				

**G. Rent and Business Income (Needed for Benefit Cost Analysis)**

1. Total Mo. Rent from all Tenants (\$/mo)				
2. Est. Net Income of Commercial Businesses (\$/month)				

# Property Acquisition Worksheet

## A. Assure a separate worksheet for each individual property to be acquired is provided.

Application Requirements	Application Review	Verify		
		No	Yes	NA
Photos (a minimum four color photographs)  <i>Region 6 requirement</i>	<b>Assure</b> four clearly identified color photos showing the front, side and back views of each structure to be acquired are provided.			

## B. Site Information

1. Owner/co-owner's Name	<b>Assure</b> the information provided matches other entries in the application.			
2. Street Address (city, state & zip) or Phys/Legal Location	<b>Assure</b> the information provided matches other entries in the application. (Include Latitude / Longitude)			
3. Voluntary Participation and	<b>Assure</b> a letter of voluntary participation is received from each homeowner. Letter/form should also include acknowledgement of match if homeowner is responsible for 25%			
4. Repetitive Loss #	<b>Assure</b> that the repetitive loss number is entered <b>if applicable</b> .			

## C. Substantial Damage

1. Substantial Damage Certification	If applicant claims substantial damage, assure that a <b>Substantial Damage Certificate</b> signed by the Local Building Official/Floodplain Manager.			
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## D. Needed for the Benefit Cost Analysis

The data for numbers 4, 5, and 6 of this part and all of Section D are *not required if the structure is located in the SFHA and a Substantial Damage Certificate is attached.*

1. Base Flood Elevation of Property or Advisory Base Flood Elevation	<b>Assure</b> the following information is provided: ➤ Base flood elevation, prepared by a surveyor ➤ Elevation Certificate			
2. Lowest (Finished) Floor Elevation of Principal Structure	<b>Assure</b> the following information is provided: ➤ Lowest (Finished) Floor Elevation of Principal Structure (above sea level) ➤ Elevation Certificate			
3. Depth of Water	<b>Assure</b> the following information is provided: ➤ Depth of water in the structure _____ inches for ___ day(s)			
4. Post Mitigation Property Use  <i>44 CFR § 80.5 (a)(4)</i>	<b>Assure</b> post mitigation use provided in the statement of work and/or this worksheet is in concurrence with 44 CFR 206.434(e). Examples include open space, park, wetland, and retention pond.			

## E. Structure Information

1. Building Type	<b>Assure</b> one option is checked.			
2. Building Use	<b>Assure</b> at least one option is checked.			
3. Construction Type	<b>Assure</b> one option is checked.			
4. Construction Date	<b>Assure</b> the date of construction for the structure is provided.			
5. Total Sq. Ft. of Principal Structure	<b>Assure</b> the square footage is provided (heated & cooled areas only).			

**F. History of Hazards/Damages (to the Property being acquired)**

**NOTE:** The following data are not required if the property is located in the Flood way or if a Substantial Damage Certificate (for most recent disaster) is attached.

Application Requirements	Application Review	Verify		
		No	Yes	NA
1. Current & Past Damages	<b>Assure</b> current and past damages to the property (including damages to the structure, its contents, and any displacement costs) are provided. The data should include damage from declared disaster events AND other hazard events that did not result in a presidential declaration.			

*Note regarding damage estimates: the date, level of event, description of damages, cost of repairs/replacement must be specific to ONLY the building under consideration. Countywide damage estimates (e.g., Flood of 1999 caused 2 million dollars damage) cannot be used. Additionally, vague information is not useful or acceptable in lieu of specific building damage estimates. The property damages can be a homeowner’s estimate; however, please include a contractor’s itemized repair estimate, if possible.*

**G. Acquisition Cost Worksheet**

Assure cost data is provided.

1. Acquisition Cost	<b>Assure</b> a separate Acquisition Cost Worksheet for each property to be acquired is provided. (If the project involves the acquisition of several properties, the applicant may provide a single spreadsheet that lists each property. The spreadsheet should contain all of the information fields in the Acquisition Cost Worksheet provided in the application.			
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*Please note: (Pre-Disaster Fair Market Value) The community may determine the pre-disaster fair market value by using either the local tax assessed value (plus a percentage to approximate market value) or a State Certified Property Appraiser’s estimate. In either case, the market value must be based on pre-disaster conditions. Also, if a local tax assessed value is used, a letter from the Local Property Appraiser must accompany the application. All appraisals must be consistent.*

# Elevation Worksheet

- Recommended elevation is at least two feet above the Base Flood Elevation.
- **Assure** the number of feet to be elevated and the damage history for the structure under consideration (only) are provided.
- A separate elevation worksheet must be completed for each structure to be elevated.

Application Requirements	Application Review	Verify		
		No	Yes	NA
Photos (a minimum four color photographs)  <i>Region 6 Requirement</i>	<b>Assure</b> four clearly identified color photos showing front, side and back views of each structure to be elevated are provided			

## **A. Site Information:**

1. Owner's Name	<b>Assure</b> the information provided matches other entries in the application.			
2. Street Address (City, state and zip) or Phys/Legal Location	<b>Assure</b> the information provided matches other entries in the application.			
3. Voluntary Participation	<b>Assure</b> a letter of voluntary participation is received from each homeowner.			
4. Repetitive Loss #	<b>Assure</b> that the repetitive loss number is entered if applicable.			

## **B. Structure Information:** Needed for the Benefit Cost Analysis

1. Building Type	<b>Assure</b> one option is checked.			
2. Building Use	<b>Assure</b> at least one option is checked.			
3. Construction Type	<b>Assure</b> one option is checked.			
4. Foundation Type	<b>Assure</b> one option is selected.			
5. Construction Date	<b>Assure</b> the date of construction for the structure is provided.			
6. Modification/Upgrades Date	<b>Assure</b> the date of any modification and/or upgrades for the structure is provided, if applicable. (If the applicant states the structure has been modified and/or upgraded the date must be provided.)			
7. Pre-disaster Value  <i>Needed for BCA</i>	<b>Assure</b> the amount and support documents are provided. Documentation options may be: 1. Tax Assessor's record or 2. Certified appraisal (pre-disaster)			
8. Total Value of Contents  <i>Needed for BCA</i>	<b>Assure</b> total value of content is provided. ➤ Up to 30% of the building replacement value or \$20,000 is the FEMA default and no support documentation required. <u>Otherwise, support documentation</u> , such as, insurance records, appraisals, purchase receipts, estimates based on current market prices for similar contents <u>is required</u>			
9. Flooding Depth	<b>Assure</b> the flooding depth is provided.			
10. Flooding Period	<b>Assure</b> the flooding period is provided.			
11. Level of Flooding	<b>Assure</b> the level of flooding is provided.			
12. Elevation Information	<b>Assure</b> an elevation certificate is provided.			

## **C. Required Information for Elevation Projects Located in a V-Zone or Numbered A-Zone**

1. Elevation of Lowest Livable Floor	<b>Assure</b> a copy of the surveyor or engineer's Elevation Certificate for the building is provided. If not provided flag in tracker and defer to engineering.			
<b>Application Requirements</b>	<b>Application Review</b>	No	Verify Yes	N/A
2. Base Flood Elevation	<b>Assure</b> the Base Flood Elevation prepared by a surveyor is provided			
3. Local Code Elevation Requirement	<b>Assure</b> the local code requirement regarding elevation is provided (e.g., ABFE + 1.0', etc. assure a copy of the applicable local code is provided)			
4. Flood Frequency*	<b>Assure</b> the appropriate flood frequency information is provided.			

**D. History of Hazards/Damages (to the Property being elevated)**

**NOTE:** *The following data are not required if the property is located in the Flood way or if a Substantial Damage Certificate (for most recent disaster) is attached.*

Current & Past Damages	<b>Assure</b> current and past damages to the property (including damages to the structure, its contents, and any displacement costs) are provided. The data should include damage from declared disaster events AND other hazard events that did not result in a presidential declaration.			
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**Note regarding damage estimates:** *the date, level of event, description of damages, cost of repairs/replacement must be specific to ONLY the building under consideration. Countywide damage estimates (e.g., Flood of 1999 caused 2 million dollars damage) cannot be used. Additionally, vague information is not useful or acceptable in lieu of specific building damage estimates. The property damages can be a homeowner's estimate; however, please include a contractor's itemized repair estimate, if possible.*

**E. Elevation Cost Information**

Assure the Elevation Cost Worksheet includes *all* project costs to develop a detailed cost estimate. Any project costs that do not clearly fall under the specified categories should be submitted for review and determination of funding eligibility under the HMGP program. For example, newspaper articles, insurance records, receipts, logs or journals.

Verify both horizontal and vertical calculations.

# Drainage Worksheet

Assure the municipality/county and project title is provided and correspond with other sections of the application.

**Municipality/County:** \_\_\_\_\_

**Project Title:** \_\_\_\_\_

Application Requirements	Application Review	No	Verify Yes	N/A
1. A Summary Report from the consultant or Professional Engineer describing the problem and the proposed solution with supporting Engineering Calculations for the project/solution. The report should also certify the level of protection and the magnitude of event the completed scope of work will mitigate. (Example: 40 homes will be protected against a 100 Year Flood Event.) Finally, the report should provide an estimate of damages that is anticipated for events beyond the mitigation efforts. (Example: The 40 homes can anticipate 15% structural damages for 250 Year Event and 30% structural damages for a 500 Year Flood Event).				
2. Plot the project area on a Flood Insurance Rate Map (FIRM), include the front page of map displaying the Community Identification Number.				
3. City or County Scale Map identifying the entire project area.				
<p>4. Provide attachment to verify the total number of repetitive loss structures within the affected basin. (Home owner name, address, type of home, content damage, structure damage). The following should also be provided:</p> <ul style="list-style-type: none"> <li>➤ Depth of flooding inside each structure. (For example, pictures, newspaper articles, and/or insurance damage estimates)</li> <li>➤ Elevation Certificate for each structure.</li> <li>➤ For each structure provide one of the following: Uniform Residential Appraisal Report (URAR) or Summary Appraisal from Realtor or Means Cost Estimate or Marshal &amp; Swift cost estimate.</li> <li>➤ Verification of the “Frequency of Event” which caused the damage to the property i.e., 10-Year, 25- Year, 50-Year 100-Year etc. (Information must be obtained from USGS, NWS, NOAA, or Hydraulic/Hydrology Engineer or Rainfall totals for specific date, month &amp; year i.e. how many inches in what period of time).</li> <li>➤ Verification of losses due to repetitive minor flood events (e.g.. 1, 2,5 Year Frequency) indicate name of event, date of incident and amount of loss per structure building and content. (Same support documentation as “depth of flooding inside each structure” above.)</li> </ul>				
<p>5. Economic loss per day for loss of function of bridge or road. The FEMA default is \$32.23 (note this figure includes premium for emergency vehicle response loss of function). Estimated number of -one way trips. (DOT, Public Works or internal transportation department reports.)</p> <ul style="list-style-type: none"> <li>➤ Detour &amp; delay time per one-way trip (hours, days). (DOT, Public Works or internal transportation department reports.)</li> </ul>				
6. Total number of structures that will benefit from the mitigation project and history of past damage to those structures.				
7. Color photographs of the damaged infrastructure property. (Ditches, Culverts, Swales, Detention/retention basins and ponds). (DIRECTION must be identified.)				
8. Preliminary or final Engineering Design Plans or feasibility study <b>including</b> a line item breakdown of the Total Project Cost.				
9. A Letter of Map Revision (LOMR) may be needed for this project. Any changes to the FIRM need to be reflected on the flood maps, which is accomplished through the LOMR process. The construction of this project may lower the 100-year flood elevation and thus, possibly lower the flood insurance rates for structures in the project area.				

# Plans Worksheet

The statement of work must contain the following information:

Application Requirements	YES	NO
1. Statement that the plan will comply with Local Mitigation Planning found in 44CFR Part 201. <i>Ref: 44CFR201.6(Local) 44CFR201.7(Tribal) 44CFR201.4&amp;5(State)</i>		
2. Statement the proposed planning activity will result in a <b>new</b> hazard mitigation plan or an <b>update</b> of an existing hazard mitigation plan. <i>FY011 HMA Guidance H.1.2</i>		
3. Identify the jurisdiction(s) that will participate in the plan (cities, counties, school districts, quasi-governments, etc.) that will participate in the plan and describe these jurisdictions. <i>FY011 HMA Guidance H.1.2</i>		
4. For Multi-jurisdictional plans, a statement(s) of intent to participate in the planning activity, individually signed by each participating jurisdiction, and provide a statement on how the overall planning effort will be coordinated. <i>FY011 HMA Guidance H1.2</i>		
5. Description of the process for plan development clearly demonstrating applicable regulatory requirements will be met. For example, detail documentation (including who will be responsible for completing each task) the activities the jurisdiction(s) will complete to <b>develop or update</b> the plan, including public involvement, identification of hazards, development of a comprehensive risk/vulnerability assessment, identification of mitigation goals and strategies, and plan implementation, and describe how these activities relate to the cost estimate. <i>FY011 HMA guidance H1.2</i>		
6. Description of the plan adoption process for the jurisdiction(s) to ensure sufficient time to complete the plan, as well as time for State and FEMA review and, if necessary, time to complete any required revisions and to formally adopt the plan. <i>(R6 Recommendation: first submittal of the plan to FEMA no less than 6 (six) months prior to the end of the original performance period.)</i> <i>FY011 HMA Guidance H1.2</i>		
7. Work schedule must allow sufficient time for State and FEMA reviews; preparation of required revisions, if needed; formal adoption by the jurisdiction(s); and FEMA approval. <i>(FY011 HMA Guidance H2) (R6 Recommendation: first submittal of the plan to FEMA a minimum of 6 (six) months prior to the end of the original performance period.)</i>		
<b>Additionally, for an Plan Update, the SOW must include the reasons for the update and:</b>		
8. Document in detail the activities the jurisdiction (sub-grantee) will complete to update each section (planning process, risk assessment, mitigation strategy, and plan implementation to include: Completion of a thorough review of each section of the previous plan. <i>(FY011 HMA Guidance H1.2)</i>		
9. Incorporation of appropriate updates to address gaps in each section of the plan. <i>(FY011 HMA Guidance H1.2)</i>		
10. Inclusion of any new /modified/updated information (including hazard, land use, and development trends), findings, research, risk data, etc. in each section of the plan. <i>(FY011 HMA Guidance H1.2)</i>		
11. A discussion of how the plan was implemented since the approval of the last plan. <i>(FY011 HMA Guidance H1.2)</i>		
12. A discussion of whether the plan update process in the existing plan will be followed or what modifications to that process will be incorporated. <i>(FY011 HMA Guidance H1.2)</i>		
13. The sub-application should include a copy of the crosswalk from the FEMA approval of the previous plan, if available. <i>(FY011 HMA Guidance H1.2; R6 Requirement)</i>		
<b>Hazard Mitigation Planning Work Schedule must include:</b>		
14. In addition to standard items in H.3, the HMP cost estimate must include a line item breakdown of costs associated with all elements described in the SOW (such as: 1) Meetings, including labor, travel expenses, and supplies; 2) Data research and collection, including eligible mapping activities or risk assessment; 3) Plan drafting, review and final production; 4) Information dissemination activities, including printing and advertising; 5) Professional development training, tuition, and travel for the purpose of carrying out the planning SOW). <i>(FY011 HMA Guidance H.3.2)</i>		

## Generator Worksheet 5%

Application Requirements	Application Review	Verify		
		No	Yes	NA
	Each grant application must contain the following information.			

### A. Project Information

1. Building Use	<b>Assure</b> the information provided matches other entries in the application. Description of Building use where generator will be utilized.			
2. Address	<b>Assure</b> the information provided matches other entries in the application.			
3. City, State & Zip	<b>Assure</b> the information provided matches other entries in the application.			
4. Latitude and Longitude	<b>Assure</b> the latitude and longitude of the generator installations site (or sites if there will be more than one generator at a given building) is entered into NEMIS.			
5. Replacing/New/Additional	Is the generator replacing an existing generator, a new installation, or an additional generator? Why?			
<i>Region 6 Requirement</i>				
6. Generator Size	Assure Justification for the proper size of the generator for the building. (i.e. by wattage) Include specifications: how did you come to your decision about the appropriate size of Generator.			
<i>Region 6 Requirement HMA Guidance Part III D.3</i>				
7. Exterior or Interior	<b>Explain</b> if the generator will be placed on the exterior or interior of the building, If exterior how will it be protected.			
<i>Environmental Requirement</i>				

### B. Floodplain Information

Application Requirements	Application Review	Verify		
		No	Yes	NA
1. Copies of FIRM Map	<b>*Assure</b> a copy of the FIRM is included with the application and the <b>project site clearly identified</b> . The FIRM Panel number must be included. NOTE: If the site will be located in the floodplain, the statement of work for the project should show that the generator will be <b>ELEVATED</b> above the base flood elevation.			
2. Flood Zone Determination	<b>*Assure</b> the flood zone is identified. (Contact NFIP Coordinator for information provided by NFIP )			

### C. Historic Properties Information

Application Requirements	Application Review	Verify		
		No	Yes	NA
1. Construction Date	<b>Assure</b> the date of construction for the structure is provided.			
2. SHPO	SHPO consultation letters, which must include a copy of the “NO Historic Properties Affected” response, are required <b>only for the following actions:</b> <ul style="list-style-type: none"> <li>• The Generator is being installed at a building that is 45 years or older; OR</li> <li>• The generator is being installed at a courthouse; OR</li> <li>• The generator is being installed on previously undisturbed ground.</li> </ul>			

\* Additional information maybe required depending upon the nature of the project.