### OMB Control# 1660-0072

#### Expiration Date: 3/30/2014

#### PAPERWORK BURDEN DISCLOSURE NOTICE

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## **Project Narrative**

## Applicant Information:

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7.Hazard Information						
8.Scope of Work 9.Properties	* Name of <u>Applicant</u>	Find Organization Help				
10.Decision Making Process	State	AK				
11.Cost Estimate 12.Match Sources	Congressional District	Look up congressional district				
13.Cost Effectiveness Information	* Type of Applicant	State Government				
14.Environmental/Historic Preservation Information	If Private Non-Profit.					
15.Maintenance Schedule	" <u>Invate North Toric</u> ,	Help				
16 Evaluation Information 17.Comments and Attachments 18.Assurances and Certifications 19.Review and Submit Application	Describe the legal status, function, and facilities owned:	(Maximum 4000 characters)				
Print Application Return to Home Page	State Tax Number:	(e.g. 12-3456789)				
Logout Privacy Statement Disclaimers	Federal Tax Number:	(e.g. 12-3456789)				
	If Other, please specify:					
	* Enter Federal Employer Identification Number(EIN). If Indian Tribe, this is your Tribal Identification Number.	12-3456789 (e.g. 12-3456789) Help				
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# Mitigation Activity Information:

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3.Contact Information	~+	incation 62 /0 complete
4.Community Information 5.Mitigation Plan Information	Please provide the following information. Click on the Add button to add activities. To replace an activity, click on the Replace button. To delete an activity, clic Please note that only one activity can be replaced at a time. When you are finished, click on the Save and Continue button below.	k on the Delete button.
6.Mitigation Activity Information		
7.Hazard Information 8.Scope of Work	Note: Fields marked with an * are required.	
9.Properties	• What type of activity are you proposing? Add Re	eplace Delete Help
10.Decision Making Process 11.Cost Estimate		
12.Match Sources	Select Activity Code Activity Name	
13.Cost Effectiveness Information	103.2 Activity 103.2	
14.Environmental/Historic Preservation Information	If you selected Other or Miscellaneous, above, please specify:	
15.Maintenance Schedule 16.Evaluation Information		
17.Comments and Attachments	* Title of your proposed activity (should include the type of activity and location)	
18.Assurances and Certifications	SCR 1199 PJ test (PDMC) (e.g. City of Fairfax Retroft Project)	
19.Review and Submit Application	* Are you doing construction in this project?	
Print Application	O Yes  No	
Return to Home Page	If you would like to make any comments, please enter them below. (Maximum 4000 characters)	
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Hazard Information	Hazard Information (Part 1 of 3)	
1.Application Status 2.Applicant Information 3.Contact Information 4.Community Information 5.Mitigation Plan Information	Application 82% complete Please provide the following information. When you are finished, click the Save and Continue button below.	
6.Mitigation Activity Information	Problem Description Help	
7.Hazard Information 8.Scope of Work	Please describe the problem to be mitigated. Include the geographic area in your description.	
9.Properties	(Maximum 4000 characters)	
10.Decision Making Process		
11.Cost Estimate 12.Match Sources	v	
13.Cost Effectiveness Information 14.Environmental/Historic	Enter the Latitude and Longitude coordinates for the project area.	
Preservation Information 15.Maintenance Schedule	Latitude :         (e.g. 80.4301, should be between -90 to +90)         Help	
16.Evaluation Information 17.Comments and Attachments	Longitude :         (e.g. 89.4301, should be between -160 to +180)         Help	
18.Assurances and Certifications	To attach documents, click the Attachments button below.	
19.Review and Submit Application	Attachments	
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Hazard Information	Hazard Information (Part 2 of 3)	
1. Application Status     2. Applicant Information     3. Contact Information     4. Communky Information     5. Mitigation Plan Information	Please provide the following information. When you are finished, click the Save and Continue button below.	Application 82% complete
6.Mitigation Activity Information	Hazards	
7.Hazard Information 8.Scope of Work 9.Properties 10.Decision Making Process 11.Cost Estimate	Select hazards to be mitigated:	
12.Match Sources 13.Cost Effectiveness Information	If other hazards, please specify:	
14.Environmental/Historic Preservation Information	If you would like to make any comments, please enter them below.	
15.Maintenance Schedule	(Maximum 4000 characters)	
16.Evaluation Information 17.Comments and Attachments 18.Assurances and Certifications		
19.Review and Submit Application	Te attack decourses a list the Affecture of botton below.	
	To attach documents, click the Attachments button below.	
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L'Application Status     Z-Applicant Information     3.Contact Information     4.Community Information     S.Mitigation Plan Information     S.Mitigation Activity Information     Z.Hazard Information	Please provide the following information. When you are finished, click the Save and Continue Note: Fields marked with an * are required.	Application 82% complete button below.						
8.Scope of Work	FIRM Information							
9. Properties 10. Decision Making Process 11. Cost Estimate 12. Match Sources 13. Cost Effectiveness Information	Is the project located within a hazard area (check all that apply):	<ul> <li>☐ Eloodway</li> <li>☐ Eloodplain</li> <li>☐ Other identified high hazard area</li> <li>☑ No</li> </ul>						
14.Environmental/Historic Preservation Information	If other identified high hazard area, please specify:							
15.Maintenance Schedule 18.Evaluation Information 17.Comments and Attachments 18.Assurances and Certifications 19.Review and Submit Application	Is there a Flood Insurance Rate Map (FIRM) or Flood Hazard Boundary Map (FHBM) available for your project area? If you have selected Yes, the following three fields are required:	O Yes  No Heb						
Print Application	Enter <u>FIRM Panel Number.</u>	Нер						
Return to Home Page		Check if Not Applicable						
Privacy Statement Disclaimers	Mark your project site on the FIRM/FHBM (even if it is out of the floodplain) Link to create FIRMette for inclusion with application	Electronic map attached     Hard copy provided     Not Applicable						
	Select Flood Zone Designation	(control-cick for multiple selections): C, X B, X N Help						
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3.Contact Information 4.Community Information	Application 82% complete	
5.Mitigation Plan Information	Please provide the following information. When you are finished, click the Save and Continue button below.	
6.Mitigation Activity Information 7.Hazard Information	Note: Fields marked with an * are required.	
8.Scope of Work		
9.Properties 10.Decision Making Process	What are the goals and objectives of this activity?     Hele	
11.Cost Estimate	(Maximum 4000 characters)	
12.Match Sources		
13.Cost Effectiveness Information		
14.Environmental/Historic Preservation Information	×	
15.Maintenance Schedule	Briefly describe the need for this activity.	
16.Evaluation Information	(Maximum 4000 characters)	
17.Comments and Attachments	asdf	
18.Assurances and Certifications		
19.Review and Submit Application		
Print Application		
Return to Home Page	Describe the problems this activity will address.	
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	Describe the methodology for implementing this activity.	
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7.Hazard Information									
8.Scope of Work 9.Properties									
10.Decision Making Process				~					
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8.Scope of Work 9.Properties	Enter Work Schedule						Help
10.Decision Making Process 11.Cost Estimate	Description Of Task	Starting Point	Unit Of Time	Duration	Unit Of Time	Work Complete By	Action
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13.Cost Effectiveness Information 14.Environmental/Historic Preservation Information	* Estimate the total duration of the (Must equal or exceed each task duration)	proposed activity:		Day(s) 💙			
15.Maintenance Schedule 16.Evaluation Information	• Add Task						
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7.Hazard Information	* Description of Task				
8.Scope of Work 9.Properties		(e.	g. Ordering Shutters.)		
10.Decision Making Process	Starting Point	L	Jnit Of Time	Duration	Unit Of Time
11.Cost Estimate 12.Match Sources	(start day of the task e.g.	D)	Day(s) 🔽 (e.g. Days)	(a number e.g. 3)	Day(s) (e.g. Days)
13.Cost Effectiveness Information 14.Environmental/Historic	Who will complete the work?				
Preservation Information					
15.Maintenance Schedule 16.Evaluation Information 17.Comments and Attachments 18.Assurances and Certifications	Go Back Save Save and	Continue			
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4.Community Information	Note: Fields marked with an • are required.			
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6.Mitigation Activity Information 7.Hazard Information	* Description of Task			
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9.Properties 10.Decision Making Process		(e.g. Ordering Shutters.)	Duration	Unit Of Time
11.Cost Estimate	Starting Point	Unit Of Time	* Duration	Unit Of Time
12.Match Sources	1 (start day of the task e.g. 4)	Day(s) (e.g. Days)	4 (a number e.g. 3)	Day(s) V (e.g. Days)
13.Cost Effectiveness Information 14.Environmental/Historic	Who will complete the work?	-		
Preservation Information				
15.Maintenance Schedule	L			
16.Evaluation Information 17.Comments and Attachments	Go Back Save Save and Continue			
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5.Mitigation Plan Information	click the appropriate link under the Action colu	nn. Depending on the activity you selected from th	e Mitigation Activity	/ Information	section, some	activities may require	e additional		
6.Mitigation Activity Information		ant to add additional property information for an acti	vity that has the op	tion to, chec	k the Property	Information Not App	licable		
7.Hazard Information	checkbox. When you are finished, click the Sa	ve and Continue button below.							
8.Scope of Work 9.Properties	Note: Fields marked with an * are required. Pro	perties marked with an ** are incomplete.							
10.Decision Making Process									
11.Cost Estimate	Activity 103.2 (103.2)								
12.Match Sources 13.Cost Effectiveness Information	Property Owner's Name	Damaged Property Address	City	State	ZIP	Repetitive	Action		
14.Environmental/Historic						Loss	Update		
Preservation Information 15.Maintenance Schedule	aa	<u>1 E a Blvd E</u>	а	AK	12312	No	Delete		
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6.Mitigation Activity Information 7.Hazard Information	Property Information V Go						
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9.Properties	Note: Fields marked with an * are required.						
10.Decision Making Process							
11.Cost Estimate 12.Match Sources	Damaged Property Address:						
13.Cost Effectiveness Information	Address line 1 Street Number Direction Street Name Street Type Direction						
14.Environmental/Historic	1 East V a Boulevard V East V						
Preservation Information	If Other, Specify Street Type:						
15.Maintenance Schedule							
16.Evaluation Information 17.Comments and Attachments	Address line 2						
18.Assurances and Certifications	Audress line 2 Unit Type M Number						
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	Owner Information:						
	Owner information. If the owner is an organization, then split this information in the First and Last Name.						
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1.Application Status	° Last Name	a
2.Applicant Information 3.Contact Information		Home (e.g. 703-456-7890) Office (e.g. 703-456-7890)
4.Community Information	Phone	Ext.
5.Mitigation Plan Information 6.Mitigation Activity Information	Filone	Cell (e.g. 703-456-7890) Other (e.g. 703-456-7890)
7.Hazard Information		Ext.
8.Scope of Work	Owner's Mailing Address (check if this address is the same as	Property Address above):
9.Properties 10.Decision Making Process	Address line 1	Street Number Direction Street Name Street Type Direction
11.Cost Estimate		1 East V a Boulevard V East V
12.Match Sources		If Other, Specify Street Type:
13.Cost Effectiveness Information		
14.Environmental/Historic Preservation Information	Address line 2	
15.Maintenance Schedule		Unit Type Number
16.Evaluation Information		If Other, Specify Unit Type:
17.Comments and Attachments 18.Assurances and Certifications		
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Disclaimers	* Does this property	
	have other co-owners or holders of recorded interest?	O Yes 🖲 No
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10.Decision Making Process 11.Cost Estimate	-			
12.Match Sources	Co-owner or Owner of Property Interest In If the co-owner is an organization, then split this inform			
13.Cost Effectiveness Information 14.Environmental/Historic	* First Name			
Preservation Information	Middle Name			
15.Maintenance Schedule 16.Evaluation Information	* Last Name			
17.Comments and Attachments 18.Assurances and Certifications 19.Review and Submit Application Print Application	Phone	Home (e.g. 703-456-7890) Cell (e.g. 703-456-7890)	Office (e.g. 703-456-7890) Ext. Other (e.g. 703-456-7890) Ext.	
Return to Home Page	Co-owner's Mailing Address:			
Privacy Statement Disclaimers	Owner's Mailing Address	ation (Note: "None" can be selected to edit address after yo		None
<u>Discuttors</u>	Address line 1	Street Number Direction Street Nam	·	Direction
			If Other, Select Street Type:	
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Properties	Owner's Mailing Address	O Property Address	None
1.Application Status	Address line 1	Street Number Direction Street Name	Street Type Direction
2.Applicant Information 3.Contact Information			<b>v</b>
4.Community Information			If Other, Select Street Type:
5.Mitigation Plan Information			
6.Mitigation Activity Information 7.Hazard Information	Address line 2	Unit Type	
8.Scope of Work		Unit Type Number	
9.Properties 10.Decision Making Process		n other, select onit type.	
11.Cost Estimate	Other (PO Box, Route, etc)		
12.Match Sources			
13.Cost Effectiveness Information 14.Environmental/Historic	City		
Preservation Information	State	Choose 💌	
15.Maintenance Schedule 16.Evaluation Information	ZIP	(e.g. 70354-4456) Need help for ZIP+4?	
7.Comments and Attachments If you would like to make any comments, please enter them below.			
18 Assurances and Certifications (Maximum 4000 characters)			
19. Review and Submt Application			
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3.Contact Information				
4.Community Information	Please provide the following information. When you are finished, click the S		on below to continue to the next pro	operty section. Or, you may select the section
5.Mitigation Plan Information 6.Mitigation Activity Information	you would like to complete from the drop down menu below then click the G	30 button.		
7.Hazard Information	Property Owner Information 🗸 Go			
8.Scope of Work				
9.Properties	Note: Fields marked with an * are required.			
10.Decision Making Process 11.Cost Estimate				
12.Match Sources	Property Information	-		
13.Cost Effectiveness Information	Age of structure (year built)		(YYYY e.g. 2001)	
14.Environmental/Historic Preservation Information	SHPO Review	~		Help
15.Maintenance Schedule 16.Evaluation Information	SHPO Reviewed Date		(MM-DD-YYYYY e.g. 02-05-2003)	
17.Comments and Attachments	* Structure Type	2-4 Family	~	
18.Assurances and Certifications	If Other Structure Type, please specify			
19.Review and Submit Application				
	* Foundation Type	Basement	*	
Print Application Return to Home Page	If Other Foundation Type, please specify			
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Properties	Property Tax Identification Number	
1.Application Status 2.Applicant Information	Latitude	(e.g. 80.43014 Should be between -90 to +90)
3.Contact Information 4.Community Information	Longitude	(e.g. 179.43014 Should be between -180 to +180)
5.Mitigation Plan Information 6.Mitigation Activity Information	Does this property have a <u>NFIP Policy Number</u> ? (Note: For FMA, SRL and RFC grants, a <b>positive</b> response to this question is required)	O Yes 🖲 No
7.Hazard Information 8.Scope of Work	If Yes, then provide policy Number	Нер
9.Properties 10.Decision Making Process	Insurance Company	
11.Cost Estimate 12.Match Sources 13.Cost Effectiveness Information 14.Environmental/Historic Preservation Information	<ul> <li>Select hazards to be mitigated:</li> </ul>	(control-click for multiple selections): Biological Chemical Civil Unrest Coastal Storm
15.Maintenance Schedule 16.Evaluation Information	If other hazards, please specify	
17.Comments and Attachments	* Damage Category	0-49% Damaged 💌
18.Assurances and Certifications 19.Review and Submit Application	Pre-Event Fair Market Value	S Help
Print Application	Benefit Cost Analysis Performed	Help
Return to Home Page	Benefit Cost Ratio	
Privacy Statement Disclaimers	* <u>Repetitive Loss</u> Structure	No You may click on <u>www.NFIPBureau.FEMA.gov</u> and then select Request an account under MY PROFILE on the left menu bar in order to check for Repetitive Loss Property data.
	If yes, <u>Property Locator Number</u>	Heip
	If yes, Number of Claims	· · · · · · · · · · · · · · · · · · ·
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Properties	Insurance Company			
Application Status     Applicant Information     Gontact Information     A.Community Information     S.Mitigation Plan Information	<ul> <li>Select hazards to be mitigated:</li> </ul>	(control-click for multiple selections): Biological ▲ Chemical Civil Unrest Coastal Storm ▼		
6.Mitigation Activity Information 7.Hazard Information	If other hazards, please specify			
8.Scope of Work 9.Properties	* Damage Category	0-49% Damaged 🔻		
10.Decision Making Process 11.Cost Estimate	Pre-Event Fair Market Value	S Help		
12.Match Sources 13.Cost Effectiveness Information	Benefit Cost Analysis Performed	Help		
14.Environmental/Historic	Benefit Cost Ratio			
Preservation Information 15.Maintenance Schedule 16.Evaluation Information 17.Comments and Attachments	* Repetitive Loss Structure	No  You may click on <u>www.NFPBureau.FEMA.gov</u> and then select Request an account under MY PROFILE on the left menu bar in order to check for Repetitive Loss Property data.		
18.Assurances and Certifications 19.Review and Submit Application	If yes, <u>Property Locator Number</u>	Нер		
	If yes, Number of Claims	×		
Print Application Return to Home Page	Legal Description			
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Properties	Property (Part 3 of 3)		^
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3.Contact Information			
4.Community Information 5.Mitigation Plan Information	Please provide the following information. When you are finished, click the Save and Co down menu below then click the Go button.	ontinue button below. Or, you may select the section you would like to complete from the drop	
6.Mitigation Activity Information	down mena below then elect the ob batton.		
7.Hazard Information	Note: Fields marked with an * are required.		
8.Scope of Work 9.Properties	Property Owner Information 🗸 Go		
10.Decision Making Process			
11.Cost Estimate 12.Match Sources			
13.Cost Effectiveness Information	Property Information II:  Primary Property Action Note: Participation in open space property acquisition or relocation by		
14.Environmental/Historic	a property owner is voluntary. Consistent with the 44 CFR Part 80.13(a)(4), documentation of	Acquisition of Vacant Land	_
Preservation Information 15.Maintenance Schedule	voluntary interest must be signed by each property owner.		
16.Evaluation Information	If Other Primary Action, please specify		
17.Comments and Attachments		Acquisition of Vacant Land	
18.Assurances and Certifications 19.Review and Submit Application	Secondary Property Actions	Acquisition/Demolition Acquisition/Relocation	
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Return to Home Page	If Other Secondary Property Action, please specify		
Privacy Statement	Flood Hazard		
<u>Disclaimers</u>	Base Flood Elevation (only applicable when Property Action is Elevation)	feet (e.g. 10.3)	
	First Floor Elevation (only applicable when Property Action is Elevation)	feet (e.g. 10.5)	
	Number of feet the lowest floor elevation of the structure is being raised above Base Flood Elevation (only applicable when Property Action is Elevation)	feet (e.g. 10)	~
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3.Contact Information	Is the property located within	Select location	
4.Community Information 5.Mitigation Plan Information 6.Mitigation Activity Information	If Other Location, please specify		
7.Hazard Information 8.Scope of Work	<ul> <li>Is there a <u>Flood Insurance Rate Map (FIRM</u>) or other Flood Maps available for your project area?</li> </ul>	○ Yes ○ No ⑧ Unknown	
9.Properties 10.Decision Making Process 11.Cost Estimate	Is the property site marked on the map? Link to create FiRIMette for inclusion with application	Yes, map attached No, hard copy of map will be provided Not Applicable	
12.Match Sources 13.Cost Effectiveness Information 14.Environmental/Historic Preservation Information 15.Maintenance Schedule 16.Evaluation Information	Select <u>Flood Zone Designation</u> (only applicable when Property Action is Elevation)	(control-click for multiple selections): C. X ▲ B. X Help AR A99 ✓	
17.Comments and Attachments 18.Assurances and Certifications	If Other Flood Zone Designation, please specify		
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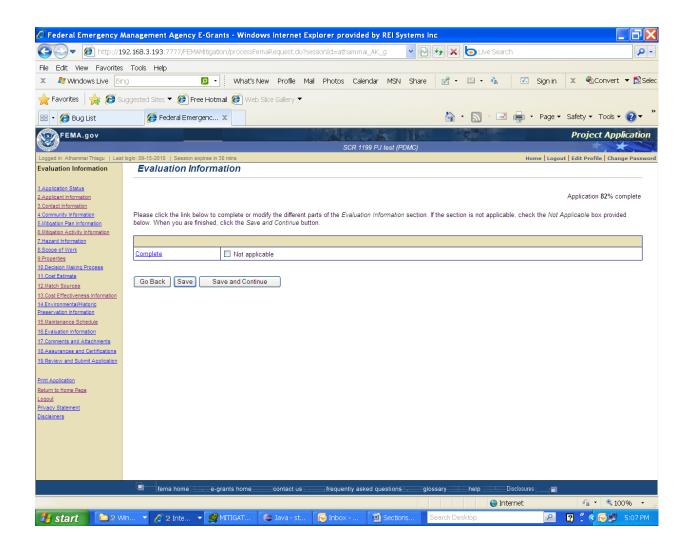
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6.Mitigation Activity Information	Describe the process you used to decide that this project is the best solution to the problem. Below are some questions to consider as you write your narrative:
7.Hazard Information	Are you focusing on the area in your community that has the greatest potential for losses?
8.Scope of Work 9.Properties	
10.Decision Making Process	
11.Cost Estimate	Have you considered the risks to critical facilities and structures and benefits to be obtained by mitigating this vulnerability?
12.Match Sources	
13.Cost Effectiveness Information 14.Environmental/Historic Preservation Information	Have you considered those areas or projects that present the greatest opportunities given the current situation and interest in your community?
15.Maintenance Schedule 16.Evaluation Information	• Are you addressing a symptom or the source of the problem? Addressing the source of the problem is a long-term solution which provides the most mitigation benefits.
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7.Hazard Information	Provide a maintenance schedule including cost information.
8.Scope of Work	(Maximum 4000 characters)
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11.Cost Estimate	
12.Match Sources	
13.Cost Effectiveness Information	Identify the entity that will perform any long-term maintenance.
14.Environmental/Historic	
Preservation Information 15.Maintenance Schedule	If you would like to make any comments, please enter them below.
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7.Hazard Information				
8.Scope of Work 9.Properties	<ul> <li>Describe the desired outcome and methodology of the mitigation activity in terms of mitigation objectives to be achieved.</li> </ul>			
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	Describe the staff and resources needed to implement this mitigation activity and the applicant's ability to provide these resources.			
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1.Application Status 2.Applicant Information	* How will this mitigation activity leverage involvement of partners to enhance its outcome?		
3.Contact Information 4.Community Information	(Maximum 4000 characters)		
5.Mitigation Plan Information	a 🗠		
6.Mitigation Activity Information			
7.Hazard Information	×		
8.Scope of Work 9.Properties	* How will this mitigation activity offer long-term financial and social benefits?		
10.Decision Making Process	(Maximum 4000 characters)		
11.Cost Estimate	a 🗠		
12.Match Sources			
13.Cost Effectiveness Information 14.Environmental/Historic	v.		
Preservation Information	<ul> <li>How does this mitigation activity comply with Federal laws and Executive Orders, and how is it complementary to other Federal programs?</li> </ul>		
15.Maintenance Schedule	(Maximun 4000 characters)		
16.Evaluation Information	a		
17.Comments and Attachments			
18.Assurances and Certifications 19.Review and Submit Application	×		
To:Review and Submit Application	* What outreach activities are planned relative to this mitigation activity (e.g., signs, press releases, success stories, developing package to share with other communities, losses		
Print Application	avoided analysis) and/or how will this mitigation activity serve as a model for other communities (i.e. Do you intend to mentor other communities, Tribes or States? Do you intend		
Return to Home Page	to prepare a description of the process followed in this activity so that others may learn from the example?)?		
Loqout Privacy Statement	(Maximum 4000 characters)		
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Evaluation Information	Evaluation Information (Part 4 of 4)	A			
Lappication Status     2.Appicant Information     3.Contact Information     4.Community Information     5.Mitigation Activity Information     7.Hispation Data Information     5.Scope of Views	Please provide the following information. When you are finished, click the Save and Co Note: Fields marked with an * are required.	Application 82% complete			
9.Properties					
10.Decision Making Process	* Please provide the percent of the population benefiting from this mitigation activity.	1.0 % (e.g. 78.5) Help			
11.Cost Estimate 12.Match Sources 13.Cost Effectiveness Information 14.Environmental/Historic Preservation Information	* Please explain your response to the above question	(Maximum 300 words)			
15.Maintenance Schedule 16.Evaluation Information	* Net Present Value of Project Benefits (A)	s 1.00			
17.Comments and Attachments	* Total Project Cost Estimate (B)	\$ 1.00			
18.Assurances and Certifications 19.Review and Submit Application	* What is the Benefit Cost Ratio for the entire project (A/B)?	1.000			
	* Analysis Type	FEMA BCA software methodology			
Print Application Return to Home Page	• What is the primary hazard data used for the BCA?	Coastal Storm 💌 Help			
Locout Privacy Statement Disclaimers	What secondary hazards were considered during the BCA?	(control-click for multiple selections):			
	Other Secondary Hazard				
	• Does this mitigation activity protect a <u>critical facility</u> ?	○ Yes  No Help  V			
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Evaluation Information	<ul> <li>What is the Benefit Cost Ratio for the entire project (A/B)?</li> </ul>	1.000			
1.Application Status	* Analysis Type	FEMA BCA software methodology			
2.Applicant Information 3.Contact Information	* What is the primary hazard data used for the BCA?	Coastal Storm 💌			
4.Community Information		(control-click for multiple selections):			
5.Mitigation Plan Information 6.Mitigation Activity Information	What secondary hazards were considered during the BCA?	Biological Chemical			
7.Hazard Information 8.Scope of Work		Civil Unrest			
9.Properties	Other Secondary Hazard				
10.Decision Making Process 11.Cost Estimate	* Does this mitigation activity protect a <u>critical facility</u> ?	O Yes  No Help			
12.Match Sources 13.Cost Effectiveness Information 14.Environmental/Historic Preservation Information 15.Maintenance Schedule	If yes, please select the type of <u>critical facilities</u> ? to be protected	(control-click for multiple selections): Hazardous Materials Facilities Emergency Operation Centers Power Facilities Water Facilities			
16.Evaluation Information	If you would like to make any comments, please enter them below.				
17.Comments and Attachments 18.Assurances and Certifications	(Maximum 4000 characters)				
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11.Cost Estimate 12.Match Sources		ZX		~		
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5.Mitigation Plan Information	Name of section:		
6.Mitigation Activity Information	Application Level		
7.Hazard Information 8.Scope of Work	If you would like to make any comments, please enter them below.		
9.Properties	(Maximum 4000 characters)		
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Preservation Information	To attach documents, click the Attachments button below. (You may includ Insurance settlements/documentation; Engineering or design specifications; etc.)	ie Photographs; Property deed; Tax assessment; Tax parcel map; Flood Insu	rance Rate Map (FIRM) with project site marked;
15.Maintenance Schedule	Name	Date Attached	Action
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7.Hazard Information 8.Scope of Work	"Select Option	Regular Mail     Electronic File				
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