



Community Contact Information			
County/Parish/City/Town/Site		Population	
Primary Point of Contact		Secondary Point of Contact	
Name		Name	
Office		Office	
Title		Title	
Mailing Address		Mailing Address	
City		City	
State, ZIP		State, ZIP	
Phone		Phone	
email		email	
Mitigation Guidelines			
MIT 1	<input type="checkbox"/> Designate and map tsunami hazard zones for emergency management planning.		<input type="checkbox"/> Verified
MIT 2	<input type="checkbox"/> Include tsunami hazard and community vulnerability information in FEMA-approved multi-hazard mitigation plan.		<input type="checkbox"/> Verified
MIT 3	<input type="checkbox"/> Install signage that identifies, for example, tsunami danger area and/or hazard zone (entering and leaving tsunami zone signs), evacuation routes, and assembly area and provides tsunami response education (go to high ground).		<input type="checkbox"/> Verified
<input type="checkbox"/> Tsunami hazard zone		<input type="checkbox"/> Entering/leaving tsunami hazard zone	<input type="checkbox"/> Evacuation routes
<input type="checkbox"/> Assembly areas		<input type="checkbox"/> Response education	
Verification Team/Renewal Notes			
<i>Please do not write in shaded areas.</i>			

Public reporting burden for this collection of information is estimated to average two hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other suggestions for reducing this burden to Mike Angove, National Weather Service, 1325 East West Highway, Room 13110, Silver Spring, MD, 20910.

Statement on confidentiality: Notwithstanding any other provisions of the law, no person is required to respond to, nor shall any person be subjected to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number.



PREP 1	Produce easily understood tsunami evacuation maps as determined to be appropriate by local authorities.		<input type="checkbox"/> Verified
	<input type="checkbox"/> Print	<input type="checkbox"/> Digital media	<input type="checkbox"/> Other _____
PREP 2	Support ongoing tsunami public education effort. This effort should include developing and distributing outreach materials: at least three wide-reaching diverse methods.		<input type="checkbox"/> Verified
<input type="checkbox"/> Brochures/flyers placed at public venues		<input type="checkbox"/> Regular tsunami-related posts for local social media such as Facebook, Twitter, etc.	
<input type="checkbox"/> Brochures/flyers sent to businesses and/or residences		<input type="checkbox"/> Billboard, roadside, highway, or educational (kiosk) signage	
<input type="checkbox"/> Faith-based/civic group newsletters or mailings		<input type="checkbox"/> Bulk public email	
<input type="checkbox"/> Locally supported website		<input type="checkbox"/> Public utility/service industry bill inserts	
<input type="checkbox"/> Sponsor local radio/television ads		<input type="checkbox"/> Historical markers/interpretive signs	
<input type="checkbox"/> Newspaper Inserts		<input type="checkbox"/> Other _____	
PREP 3	Support an ongoing sustained tsunami education effort specific to public schools in coastal community pursuing TsunamiReady recognition: At least one.		<input type="checkbox"/> Verified
<input type="checkbox"/> Distribute brochures/flyers to schools		<input type="checkbox"/> Provide contents for school website	
<input type="checkbox"/> Submit articles for school groups, such as PTA		<input type="checkbox"/> Provide posts for school social media	
<input type="checkbox"/> Include private schools in distributions above		<input type="checkbox"/> Send message via school email	
<input type="checkbox"/> Other _____			
Verification Team/Renewal Notes			



PREP 4	Hold community-wide outreach or education activity annually: at least one.	<input type="checkbox"/> Verified
<input type="checkbox"/> Leverage national, state or regional campaigns through social media		
<input type="checkbox"/> Local public safety campaign, such as "Tsunami Preparedness Week" or combine with "The Great Shakeout"		
<input type="checkbox"/> Door-to-door safety campaign		
<input type="checkbox"/> Booth at community events and/or county fairs		
<input type="checkbox"/> Multi-hazard events or presentations		
<input type="checkbox"/> Safety presentation or workshop to community or business groups that includes tsunami content		
<input type="checkbox"/> Business owner/employee training for high-occupancy businesses in tsunami hazard zones		
<input type="checkbox"/> Other _____		
PREP 5	Conduct community exercises that reinforce the concepts contained in Prep-1 through Prep-4.	<input type="checkbox"/> Verified
Exercise Location	Date of exercise	<input type="checkbox"/> Tsunami only <input type="checkbox"/> Multi-hazard Other hazards addressed _____
<input type="checkbox"/> Tabletop exercise <input type="checkbox"/> Functional exercise <input type="checkbox"/> Full-scale exercise		
PREP 6	Conduct evacuation drills for all public schools in the mapped tsunami evacuation zone to reinforce the concepts contained in Prep-1 through Prep-4.	<input type="checkbox"/> Verified
Exercise Location	Date of exercise	<input type="checkbox"/> Tsunami only <input type="checkbox"/> Multi-hazard Other hazards addressed _____
Verification Team/Renewal Notes .		



Response Guidelines		
RESP 1	Address tsunami hazards in the community's emergency operations plan (EOP) or other plan.	<input type="checkbox"/> Verified
<input type="checkbox"/> Included in EOP		
<input type="checkbox"/> Included in other plan _____		
<input type="checkbox"/> Identifies tsunami as a hazard and provides risk assessment		
<input type="checkbox"/> Details 24-hour warning point procedures		
<input type="checkbox"/> Specifies EOC activation criteria and staffing expectations		
<input type="checkbox"/> Specifies activation procedures for public warning systems		
<input type="checkbox"/> Includes contact information for all jurisdictional agencies, response partners, and NWS		
<input type="checkbox"/> Includes tsunami evacuation plans and maps		
<input type="checkbox"/> Includes procedures for updating of public warning, as well as safe return protocols		
<input type="checkbox"/> Includes procedures for providing security for evacuated areas		
<input type="checkbox"/> Includes tsunami impact reporting procedures		
RESP 2	<input type="checkbox"/> Address tsunami hazards in the emergency operations plans (EOP) for all public schools in the tsunami hazard zone.	<input type="checkbox"/> Verified
RESP 3	Commit to supporting the EOC during tsunami incidents if an EOC is opened and activated.	<input type="checkbox"/> Verified
<input type="checkbox"/> Open 24/7 or has plan to activate an EOC for tsunami incidents in accordance with EOP		
<input type="checkbox"/> Has warning reception and dissemination capability		
<input type="checkbox"/> Has ability and authority to activate the public warning system within its area of responsibility		
<input type="checkbox"/> Maintains the ability to communicate within and across jurisdictions		
<input type="checkbox"/> Maintains established communication links with NWS		
Verification Team/Renewal Notes		



RESP 4	Have redundant and reliable means for a 24-hour warning point (and EOC if activated) to receive official tsunami watch, advisory, and warning alerts: at least three.	<input type="checkbox"/> Verified
<input type="checkbox"/> NOAA Weather Radio	<input type="checkbox"/> Third-party alert provider	
<input type="checkbox"/> Statewide warning fan-out notification	<input type="checkbox"/> Local radio Emergency Alert System, LP1/LP2	
<input type="checkbox"/> NOAAPORT receiving station	<input type="checkbox"/> Active Internet monitoring capability	
<input type="checkbox"/> NAWAS drop	<input type="checkbox"/> NOAA Weather Wire drop	
<input type="checkbox"/> NWSChat	<input type="checkbox"/> USCG broadcasts/monitor marine channels	
<input type="checkbox"/> EMWIN receiver	<input type="checkbox"/> Direct email from NWS Tsunami Warning Center (TWC)	
<input type="checkbox"/> Statewide telecommunications systems	<input type="checkbox"/> Direct fax from NWS TWC	
<input type="checkbox"/> CISN display program	<input type="checkbox"/> Text message or direct pager from TWC	
<input type="checkbox"/> Amateur radio transceiver		
<input type="checkbox"/> Other _____		
RESP 5	Have redundant and reliable means for 24-hour warning point and/or EOC to disseminate official tsunami watch, advisory, and warning alerts to the public: at least three.	<input type="checkbox"/> Verified
<input type="checkbox"/> EAS message initiation and broadcast	<input type="checkbox"/> Amateur radio operator network (ham radio)	
<input type="checkbox"/> Cable TV audio/video overrides	<input type="checkbox"/> Telephone mass notification system	
<input type="checkbox"/> Local flood warning system	<input type="checkbox"/> Telephone tree to critical facilities	
<input type="checkbox"/> Plan for sirens on emergency vehicles	<input type="checkbox"/> Coordinated area-wide radio network	
<input type="checkbox"/> Outdoor warning siren(s)	<input type="checkbox"/> Countywide communications network	
<input type="checkbox"/> Local alert broadcast system	<input type="checkbox"/> Social media (Twitter, Facebook)	
<input type="checkbox"/> Local pager/texting system (dissemination)	<input type="checkbox"/> Lifeguards on beaches and on patrol	
<input type="checkbox"/> Other _____		
Verification Team/Renewal Notes		



RESP 6	Have Public Alert-certified NOAA Weather Radio (NWR) receivers in critical facilities and public venues.			<input type="checkbox"/> Verified
Office	Location or Address	NWR	Comments	
Communication dispatch center		<input type="checkbox"/>		
EOC		<input type="checkbox"/>		
City Hall, county courthouse or similar		<input type="checkbox"/>		
School superintendent		<input type="checkbox"/>		
		<input type="checkbox"/>		
		<input type="checkbox"/>		
		<input type="checkbox"/>		
		<input type="checkbox"/>		
		<input type="checkbox"/>		
RESP 7	Conduct emergency operations plan exercises that test at least one component of the community's EOP or one item from RESP 4 through RESP 6.			<input type="checkbox"/> Verified
Exercise Location	Date of exercise	<input type="checkbox"/> Tsunami only <input type="checkbox"/> Multi-hazard Other hazards addressed _____		
<input type="checkbox"/> Tabletop exercise <input type="checkbox"/> Functional exercise <input type="checkbox"/> Full-scale exercise				
Verification Team/Renewal Notes				



Signature of Applying Official			
Office Name			
Application Submitted by (name of applicant)		Title	
Signature		Date	
NWS Personnel Receiving Application (print name)		Date Received	
Site Verification Team Signatures			
Print Name			
Office		Title	
Signature		Date	
Print Name			
Office		Title	
Signature		Date	
Print Name			
Office		Title	
Signature		Date	
Print Name			
Office		Title	
Signature		Date	
Signature in Renewal Year			
Office			
Application Submitted by (name of applicant)		Title	
Signature		Date	
NWS Personnel Receiving Application (print name)		Date Received	