

Welcome!

Please type your name, title, organization and email into the chat box.



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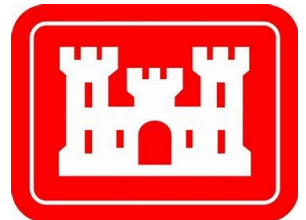


Pennsylvania 2024 Day 2 Plan Implementation and Grant Development Workshop

Day 2 Sessions April 23, 24 & 25, 2024



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PIGD Day 2 Agenda

- **9:00am: Welcome**
- **9:10am: Application Design for FEMA Hazard Mitigation Assistance (HMA) & Cost Share Discussion**
- **10:00am: Break**
- **10:05am: FEMA GO**
- **10:15am: The Environmental and Historic Preservation (EHP) Process**
- **10:30am: USACE Case Study: Successful Mitigation & Resiliency Project**
- **10:50am: Break**
- **11:00am: PA Department of Environmental Protection (DEP) Grants/Permitting**
- **11:15am: Panel Discussion / Q&A (BCA, EHP, Grant Application Development, Community Planning & Capacity Building (CPCB) & Floodplain Management**
- **11:40am: Project Applications: 2023/24 FEMA HMA Grant Cycle/Office Hours**
- **11:55am: Wrap-Up**

Application Design for FEMA Hazard Mitigation Assistance (HMA) Grants & Cost Share Discussion

Tom Hughes, SHMO, Rick Deal, DSHMO, EM MIRC Office
Amy Esterhuizen, HMGP Specialist, FEMA Region III



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Designation of Agent Resolution (DOA)

- Form designating the Applicant's Agent
 - Local contact person responsible for project start to finish
 - Primary point of contact between the applicant and PEMA
 - Appointed at a public meeting by a resolution of the governing body of the applicant organization
 - Takes on fiscal responsibility for the project
 - Jurisdiction DOA in first section, second section is the certification by ANOTHER person (can't be the same in first section!!).



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General Project Requirements

Objective

Filling out a Planning Project or Project in FEMA GO

Resources to Use

- FMA/BRIC Notice of Funding
- PEMA Homework Paper
- State Hazard Mitigation Plan (Vetted HM Activities)
- County Hazard Mitigation Plan
- HMGP Strategy/Administrative Plan/State Guidance
- 2023 HMA Guidance & Addendum
- FEMA Grant Opportunities Word Document
- PEMA Non-Disaster/Disaster Letter of Interest/Intent Forms
- Benefit Cost Analysis Tool 6.0
- BRIC & FMA Job Aids
- PEMA Triage Sheet



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Typical Eligible Projects

- Property Acquisition and Structure Demolition
- Property Acquisition and Structure Relocation
- Structure Elevation, Mitigation Reconstruction
- Dry Floodproofing of Historic Residential Structures
- Dry Floodproofing of Non-residential Structures
- Localized Flood Reduction Projects
- Structural Retrofitting of Existing Buildings
- Non-Structural Retrofitting of Existing Buildings & Facilities
- Infrastructure Retrofit
- Soil Stabilization
- Project Scoping – Indiv. Home/Community Flood
- 5% Mitigation Projects (State Initiative HMGP)
- 7% Hazard Mitigation Planning (HMGP)



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Additional HMA Eligible Project Types

- Acquisition/Relocation, **Catch Basins/Water Retention Projects**, Community Planning, Capacity Building, **Coral Reef Restoration**, Creation or Expansion of Wetlands, Freshwater Marshes, and/or Salt Marshes, Decreasing Slope Angles, Drought, Dry Floodproofing, Dry Floodproofing of Structures, Sewer backup protection, Ecological Forest Management, Elevation of structures, Elevation of utilities, **Erosion and sediment control projects**, Extreme Temperature Projects, Flood control gates, Flood Diversion and Storage Projects, Flood Risk Reduction (Both Localized and Non-localized), Floodplain and Stream Restoration Projects, Floodplain and Stream Restoration to Return Natural Flows to a Riverine System, Floodplain and Stream Restoration, and Improved Surface Infiltration, **Floodplain Reconnection and Restoration**, Floodwalls, Fuel Reduction (that addresses wildfire mitigation and includes restoration to natural conditions), Generator/Co-Generators / **Microgrids/ Solar Photovoltaic Systems/Battery Back-Up Systems**, Green Roofs, Green Streets, Increasing the Tree Canopy, Landslide/Soil Stabilization, Living Shorelines, Mitigation Reconstruction, Natural Wildlife Buffer Zone (that uses earthen materials and native and/or fire-resistant vegetation), NOAA weather radio projects, Permeable Pavement, Preservation of Mature Vegetation, Rain Gardens, Bioswales, Urban Trees and Forests, and Constructed Wetlands, Riparian Buffers, Greenways, Waterfront Parks, Geotextiles, Stabilizing Sod, Vegetative Buffer Strips, Riverine Flooding,



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And MORE HMA Eligible Project Types!!

- **Sand Dune Restoration or Stabilization**, Sewer backup protection, Shoreline Stabilization, Slope Stabilization, Tsunami Protection, Tsunami Vertical Evacuation Refuge Projects, Urban Flooding, Urban Forests, Utility and Infrastructure Protection, Water diversion, **Wildfire Mitigation** - Ecological Forest Management (fuel reduction that addresses wildfire mitigation and includes restoration to natural conditions), Wildfire Mitigation - Creation of Defensible Space (using native and/or fire-resistant vegetation), Wildfire Mitigation - Greenbelts (of diverse vegetation including trees, shrubs, grasses and wildflowers, ideally native to the area, that act as natural buffers to create separation from wildlands), Wildfire Mitigation - Natural wildlife buffer zone that uses earthen materials and native and/or fire-resistant vegetation, Wildlife Mitigation - Post-Fire Soil Stabilization (using earthen materials and native and/or fire-resistant vegetation), **Wind Retrofit**, Wind Retrofit for One- and Two-Family Residences, etc.



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Projects Eligible for Funding by Type

Regular Projects



Example(s)

- Acquisition/ Demolition
- Elevation
- Soil Stabilization
- Generator
- Green Space Infrastructure

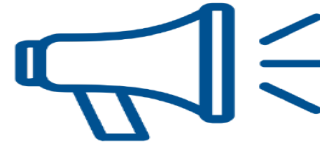
Planning Activities



Example(s)

- Local Hazard Mitigation Plan Update
- State Hazard Mitigation Plan Update
- Hazard Mitigation Plan Addendum

5% Initiative Projects



Example(s)

- Public Awareness Campaign
- Warning Signs/ Notification Systems

Technical/ Project Scoping/ Management Costs



Example(s)

- Hydrology and Hydraulic (H&H) Study
- Architectural & Engineering Designs
- Benefit Cost Analysis (BCA)



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Infrastructure Application Packet Items

For the Project

- Basic HMGP Application
- Designation of Agent Resolution
- Local Review and Compliance Letter
- Maintenance Agreement Certification
- Maps
- Photographs
- Engineering /Design
- Cost Estimate
- Statement of Work
- Funds Commitment Letter
- Support Letter
- County Plan details



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Forms

Available for download from: Example Non-Disaster Forms

<https://www.pema.pa.gov/Mitigation/Grants-Projects/Non-Disaster-Forms/Pages/default.aspx>

[PEMA](#) > [Mitigation](#) > [Grants and Projects](#) > Non-Disaster Forms

Non-Disaster Grant Forms

These are the forms you'll need to access and fill out as part of non-disaster grants. The documents are listed in a numbered format in coordination with the Hazard Mitigation Grant Program forms and to help you stay organized throughout the process.

If you have questions, contact the [State Hazard Mitigation Officer](#).

- [01 – FEMA Non-Disaster Grants Letter of Interest](#) (PDF)
- [02 – Application Guide](#) (DOC)
- [03 – Designation of Agent](#) (DOC)
- [04 – Local Compliance Review Sample Letter](#) (DOC)
- [05 – Local Maintenance Compliance Letter](#) (DOC)
- [06 – Elevation Attachment B](#) (DOC)
- [07 – Voluntary Participation Agreement](#) (DOC)



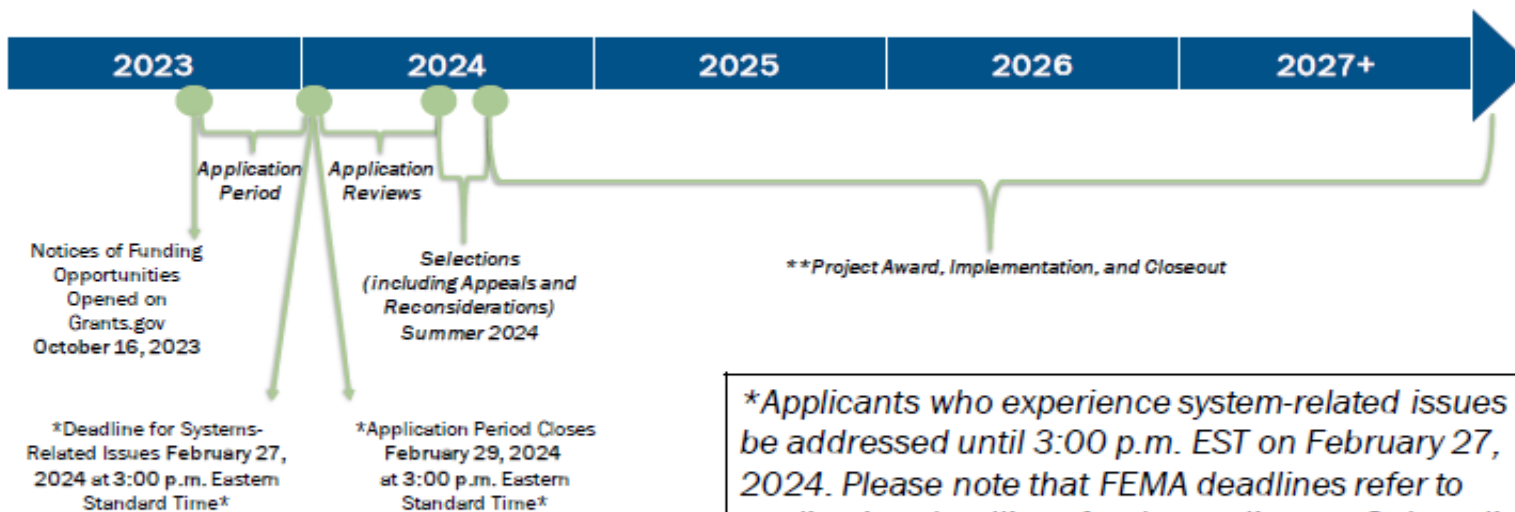
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FEMA FMA/BRIC Timeline Update

Application Cycle and Funding Deadlines



**Applicants who experience system-related issues will be addressed until 3:00 p.m. EST on February 27, 2024. Please note that FEMA deadlines refer to application deadlines for the applicants. Subapplicants should consult with their applicant agency to confirm subapplication deadlines to the applicant if applicable.*

***This timeline may vary by project type*



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How to Apply for FEMA Building Infrastructure & Communities (BRIC) & Flood Mitigation Assistance (FMA)

- Eligible Applicants must apply for funding using the new FEMA Grants Outcomes (FEMA GO) at the [FEMA GO Portal](#).
- Visit [FEMA GO Guides and Resources](#) to view the technical user manuals and support materials.
- For FEMA GO Technical Support, contact the Help Desk by calling 1-877-611-4700 or by email at: femago@fema.dhs.gov.

FEMA GO

Application Deadlines

The Application period will open end of September 2023

The Application must be received in FEMA GO end of January 2024

Technical Assistance

Applicants experience technical problems outside of their control must notify FEMA by 3:00 PM ET on established date the end of January 2024



Project Subapplication

Project Subapplication

*required field

Start a subapplication	
* Organization you are applying for	
* Organization you are applying to	
* Subapplication title	
* Subapplication type	
* Document control number (optional)	

Subapplicant information

Subapplicant information	
Name of federal agency	FEMA
Type of submission	<input type="checkbox"/> Pre-application <input type="checkbox"/> Application <input type="checkbox"/> Changed/Corrected application
* Type of Subapplicant	<input type="checkbox"/> State Government <input type="checkbox"/> Local Government <input type="checkbox"/> Indian Tribal Government <input type="checkbox"/> Special Governmental District <input type="checkbox"/> Private Non-Profit <input type="checkbox"/> Other
* Is Subapplication subject to review by Executive Order 12372 Process?	<input type="checkbox"/> Yes <input type="checkbox"/> No, program is not covered by E.O. 12372 <input type="checkbox"/> No, program has not been selected by state for review
If Yes, this preapplication/application was made available to the Executive Order 12372 Process for review on: (MM-DD-YYYY)	

- Your Organization
- Subapplicant Information
- Type of Submission
- Type of Applicant
- Executive Order 12372 Applies? 99% No
- Any Federal Debt? 99% No

Subapplicant information	
* Is the Subapplicant delinquent on any Federal debt?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please provide an explanation:	



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Project Contact/Community

- Contact info/Subrecipient Authorized Representative
- Need Primary AND Secondary
- Engineer/Project Officer – need alternate
- Community Info (Internet)

Community

Please find the community(es) that will benefit from this mitigation activity by clicking the Find Communities button. If needed, modify the Congressional District number for each community. If the Congressional district number for your community does not display correct, please contact your State NFIP coordinator.

Add Communities (complete this table for each benefitting community)	
State	
Community name (optional)	
County name (optional)	
Please provide any additional comments (optional)	
Attachments	

Contact information

Add a Subrecipient Authorized Representative (SAR)	
Title	
Prefix (optional)	<input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/> Dr.
* First Name	
Middle Initial	
* Last Name	
* Agency/Organization	
Primary phone	
Extension (optional)	
* Type	<input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Mobile
Secondary phone	
Extension	
* Type	<input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Mobile
Optional phone	
Fax number	



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Mitigation Plan

- County Hazard Mitigation Compliance
- Enhanced State Plan Approval Date
- Proposed Activity Description
- PEMA request that you cite the County HM Plan page and attached to application
- Attach FEMA Adoption Letter (Ernie Szabo or Matt McCollough may have for you)

Mitigation Plan

Please provide your plan information.

Mitigation plan information	
* Is the entity that will benefit from the proposed activity covered by a current FEMA approved multi-hazard mitigation plan in compliance with 44 CFR Part 201?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, please provide plan information:	
* Plan name	
* Plan type	<input type="checkbox"/> State Multi-hazard Mitigation Plan <input type="checkbox"/> Tribal Multi-hazard Mitigation Plan <input type="checkbox"/> Local Multi-hazard Mitigation Plan <input type="checkbox"/> Tribal (Local) Multi-hazard Mitigation Plan <input type="checkbox"/> Local Multijurisdictional Multi-hazard Mitigation Plan <input type="checkbox"/> Tribal (Local) Multijurisdictional Multi-hazard Mitigation Plan
Is this plan standard or enhanced? (for Applicants only)	<input type="checkbox"/> Standard <input type="checkbox"/> Enhanced
* Plan approval date (MM-DD-YYYY)	
Proposed activity description (optional)	
Please provide any additional comments (optional).	
Attachments:	



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Scope of Work (SOW)

- Subapplication Title (include type)
- Activities/Primary Type
- Secondary Activity
- Tertiary Activity
- Again - PEMA requests that you cite the County HM Plan page and attached to application

Scope of Work

The project Scope of Work (SOW) identifies the eligible activity, describes what will be accomplished and explains how the mitigation activity will be implemented. The mitigation activity must be described in sufficient detail to verify the cost estimate. All activities for which funding is requested must be identified in the SOW prior to the close of the application period. FEMA has different requirements for project, planning, and management cost SOWs.

Scope of work	
* Subapplication title (include type of activity and location):	
Activities	
*Primary activity type	<input type="checkbox"/> Acquisition <input type="checkbox"/> Elevation <input type="checkbox"/> Relocation <input type="checkbox"/> Mitigation reconstruction <input type="checkbox"/> Retrofit <input type="checkbox"/> Floodproofing <input type="checkbox"/> Saferoom/shelter <input type="checkbox"/> Stabilization and restoration <input type="checkbox"/> Utility and infrastructure protection <input type="checkbox"/> Flood control <input type="checkbox"/> Codes and standards <input type="checkbox"/> Warning systems <input type="checkbox"/> Wildlife management <input type="checkbox"/> Education and awareness <input type="checkbox"/> Feasibility, engineering, and design studies <input type="checkbox"/> Management costs <input type="checkbox"/> Generator <input type="checkbox"/> Relocation <input type="checkbox"/> Planning related activities <input type="checkbox"/> Partnerships <input type="checkbox"/> Other
Secondary activity type (optional)	(see list above)
Tertiary activity type (optional)	(see list above)



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SOW - Community Lifelines



- Primary Lifeline
- Primary sub-community lifeline
- Secondary community lifeline
- Secondary sub-community lifeline
- Tertiary Community lifeline (optional)
- Tertiary sub-community lifeline

Community lifelines	
*Primary community lifeline	<input type="checkbox"/> Safety and security <input type="checkbox"/> Food, water, and shelter <input type="checkbox"/> Health and medical <input type="checkbox"/> Energy <input type="checkbox"/> Communications <input type="checkbox"/> Transportation <input type="checkbox"/> Hazardous material
Primary sub-community lifeline (optional)	<input type="checkbox"/> Law enforcement <input type="checkbox"/> Fire service <input type="checkbox"/> Search and rescue <input type="checkbox"/> Government service <input type="checkbox"/> Community safety
Secondary community lifeline	(see primary community lifeline list above)
Secondary sub-community lifeline	<input type="checkbox"/> Highway/roadway/motor vehicle <input type="checkbox"/> Mass transit <input type="checkbox"/> Railway <input type="checkbox"/> Aviation <input type="checkbox"/> Maritime
Tertiary community lifeline (optional)	(see primary community lifeline list above)
Tertiary sub-community lifeline	<input type="checkbox"/> Food <input type="checkbox"/> Water <input type="checkbox"/> Shelter <input type="checkbox"/> Agriculture



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Scope of Work (SOW) – Hazard Sources

- Primary Hazard Source
- Secondary Hazard Source
- Phased Project?
- Construction
- Percentage of Population Affected

Scope of work	
Hazard sources	
Primary hazard source	<input type="checkbox"/> Biological incident <input type="checkbox"/> Chemical incident <input type="checkbox"/> Civil disturbance <input type="checkbox"/> Cyber incident <input type="checkbox"/> Dam/Levee break <input type="checkbox"/> Disease <input type="checkbox"/> Drought <input type="checkbox"/> Earthquake <input type="checkbox"/> Explosion <input type="checkbox"/> Extreme temperature <input type="checkbox"/> Fire <input type="checkbox"/> Flooding <input type="checkbox"/> Hostile action <input type="checkbox"/> Infrastructure failure <input type="checkbox"/> Landslide/Debris flow <input type="checkbox"/> Nuclear explosion <input type="checkbox"/> Radiological incident <input type="checkbox"/> Severe Storm <input type="checkbox"/> Solar event <input type="checkbox"/> Space object <input type="checkbox"/> Tornado <input type="checkbox"/> Tropical cyclone (Hurricane/Typhoon) <input type="checkbox"/> Tsunami <input type="checkbox"/> Uncategorized <input type="checkbox"/> Volcano <input type="checkbox"/> Winter storm
Secondary hazard source (optional)	(see list above)
If Uncategorized, please specify:	
* Is this a phased project? <i>If you select 'Yes' to phased project question. You must select Phase 1 or Phase 2 on Budget lines.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
* Are you doing construction in this project?	<input type="checkbox"/> Yes <input type="checkbox"/> No
* Percentage of population affected	%



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Scope of Work (SOW) – Continued

- Description of Percentage
- Detailed Info
- Implemented how?
- Feasibility and Long-Term Risk Reduction
- Who will manage?
- What will residual risk be?
- When will mitigation activity take place
- Why was this project the BEST Alternative?
- Identify how long-term maintenance will be addressed

Project Subapplication

Scope of work	
* Detail/description of stated percentage	
* Provide a clear and detailed description of your proposed activity	
* How will this mitigation activity be implemented?	
* Describe how the project is technically feasible and will be effective in reducing the risk by reducing or eliminating damage to property and/or loss of life in the project area. Please include engineering design parameters and references to the following: preliminary schematic or engineering drawings/design; applicable building codes; engineering practices and/or best practices; level of protection (e.g., life safety, 100-yr flood protection with freeboard, 100-yr wind design, etc.):	
* Who will manage and complete the mitigation activity?	
* Will the project address the hazards identified and what risks will remain from all hazards after project implementation (residual risk)?	
*Will the project address the hazards identified and what risks will remain from all hazards after project implementation (residual risk)?	
* When will the mitigation activity take place?	
* Explain why this project is the best alternative. What alternatives were considered to address the risk and why was the proposed activity considered the best alternative?	



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Scope of Work (SOW) – Continued

- Task Name (Twp Paxton Street)
- Task Description: Streambank Stabilization Project [County add]
- Start Month
- Task Duration
- Estimated total duration of activities
- Start Date
- End Date
- Need to be very conservative on this and realistic!
- **Remember 36 and 42 months Period of Performance depending on project type (infrastructure 42)**

Schedule

Specify the work schedule for the mitigation activities. Add tasks to the schedule. Please include all tasks necessary to implement this mitigation activity; include descriptions and estimated time frames.

Add a Task (complete this table for each task)	
* Task name	
* Task description	
* Start month (number)	
* Task duration (in months)	

Schedule	
* Estimate the total duration of your proposed activities (in months).	
Start date (MM/DD/YYYY)	
End date (MM/DD/YYYY)	



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Scope of Work (SOW) – Budget

- *Budget cost estimate should directly link to your scope of work and work schedule.*
- *Name of Cost Item, Unit of Measure, Unit Price, Unit Total, Cost Category*
- *You must add at least one item greater than 0 for your cost estimate.*
- *As necessary, please adjust your federal/non-federal cost share, and add the non-federal funding source(s) you are planning to use on this project.*

Add budget cost types and item(s)	
Cost type:	<input type="checkbox"/> Cost estimate
Add an item (complete table for each cost item)	
Name of cost item	
Quantity	
Unit of measure	<input type="checkbox"/> Acre <input type="checkbox"/> Cubic foot <input type="checkbox"/> Cubic yard <input type="checkbox"/> Day <input type="checkbox"/> Each <input type="checkbox"/> Foot <input type="checkbox"/> Hour <input type="checkbox"/> Inch <input type="checkbox"/> Linear foot <input type="checkbox"/> Mile <input type="checkbox"/> Million board feet <input type="checkbox"/> Square foot <input type="checkbox"/> Square yard <input type="checkbox"/> Square foot per inch <input type="checkbox"/> Ton
Unit price	\$
Unit total	
Cost category	<input type="checkbox"/> Administrative and legal expenses <input type="checkbox"/> Architectural and engineering fees <input type="checkbox"/> Construction <input type="checkbox"/> Contingencies <input type="checkbox"/> Demolition and removal <input type="checkbox"/> Equipment rental <input type="checkbox"/> Equipment purchase <input type="checkbox"/> Land, structures, rights-of-way, appraisals, etc. <input type="checkbox"/> Miscellaneous <input type="checkbox"/> Other architectural and engineering fees <input type="checkbox"/> Project inspection fees <input type="checkbox"/> Relocation expenses and payments <input type="checkbox"/> Site work



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Scope of Work (SOW) – Budget Continued

- *Pre-Award Costs? When were these incurred*
- *Phase 1, Phase 2*
- *Total Budget Cost*
- *Program Income (Optional) – There will be NO Project Income and here is why.....*

Add budget cost types and item(s)	
Pre-award	<input type="checkbox"/> Yes <input type="checkbox"/> No
Project phase	<input type="checkbox"/> Phase 1 <input type="checkbox"/> Phase 2 <input type="checkbox"/> Not applicable
* Total budget cost	\$
Program income (optional)	\$



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Scope of Work (SOW) – Cost Share

Proposed federal vs. non-federal funding shares	
Is this a small impoverished community? (See Appendix for definition) This determines your federal/non-federal share ratio.	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes	<ul style="list-style-type: none"> ▪ Federal Share Percentage 90% ▪ Non-Federal Share Percentage 10%
Based on total budget cost	\$
Proposed federal share	\$
Proposed non-federal share	
If No	<ul style="list-style-type: none"> ▪ Federal Share Percentage 75% ▪ Non-Federal Share Percentage 25%
Based on total budget cost	\$
Proposed federal share	\$

12

- Cost share or matching means the portion of project costs not paid by federal funds.
- HMA funds may be used to pay up to 75% federal share of the eligible activity costs. BRIC and small impoverished communities may be eligible for up to 90% federal share. FMA and Severe Repetitive Loss (SRL) properties may be eligible for up to 100% federal share. Repetitive loss (RL) properties may be eligible for up to 90% federal share.
- **Last HMGP 90/10 split**



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Scope of Work (SOW) – Funding Source

Proposed federal vs. non-federal funding shares	
Add funding source (complete this table for each funding source)	
Funding source	
Name of source agency	
Funding amount	\$
Percent non-federal share by source	%
Funding type	<input type="checkbox"/> Administration <input type="checkbox"/> Cash <input type="checkbox"/> Consulting fees <input type="checkbox"/> Engineering fees <input type="checkbox"/> Equipment operation <input type="checkbox"/> Rental <input type="checkbox"/> Labor <input type="checkbox"/> Other <input type="checkbox"/> Program income <input type="checkbox"/> Supplies
Date of availability (MM/DD/YYYY)	
Fund commitment letter date (MM/DD/YYYY)	
Grand Total (\$)	
Total percent non-federal share	
Please provide any addition comments (optional)	
Attachments:	

- Funding Source (Can't be federal in most cases)
- Name of Source agency
- Percent of Non-Federal Share (points if more than 25% in BRIC)
- Funding Type
- Date of Availability
- Fund Commitment Letter
- Grant Total
- Total Percent of Non-Federal Share
- Attachment is a must!!



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Project Work Schedule

- Break tasks into 1- or 2-month intervals
- HMGP project – normally 18 months
 - **Months 1-6:** purchase offers, title work, meetings with owners, setting closing dates, etc.
 - **Months 7-12:** property closings, demolition bids
 - **Months 13-18:** demolition, site restoration, closeout
- Sample acquisition project schedule:
[ADDENDEM 2 \(pa.gov\)](#)



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Cost Estimates

- Accuracy is critical!
 - State Certified Appraisal ensures accuracy of home purchase cost estimate
 - Separate the land FMV from structure FMV and document both values
- Taxes, Closing costs, Demolition and re-stabilization costs
- Legal costs
- 5% Contingency Line Item; ex: inflation, unforeseen items or 7% Contingency for Historic Preservation needs
- List management costs under “Project Management” line item – *HMGP there is a 20% Project Set-aside we have to figure 15% outside of the budget as (10% State/5%Local)*



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Tenant Displacement Issues

- Uniform Relocation Act (URA) requires relocation costs be included in cost estimate
- Notify PEMA immediately if you need URA information
- Reasonable “rule of thumb”: \$7,200/ tenant
- Don’t forget others that may be eligible (move out prior to flood repairs)
- Environmental Justice Needs



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Cost Effectiveness – Funding Source

- How was Cost Effectiveness arrived at
- Standard BCA, Pre-calculated Benefit, Substantial Damage, Other Acceptable BCA, or N/A
- Total Project Benefits
- Total Project Cost
- Benefit Cost Ratio (BCR) of ?
Equal to or Over 1.0
- Environmental and/or Social Bennies included?
- Nature-Based Solution incorporated?
- BCA Method **MUST** be attached!



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Cost-Effectiveness	
* How was cost-effectiveness determined for this project?	<input type="checkbox"/> BCA completed in FEMA's BCA toolkit (Must attach the export file, zip file, pdf file, and other supporting documentation) <input type="checkbox"/> Pre-calculated benefits <input type="checkbox"/> Substantial damage in special flood hazard area <input type="checkbox"/> Other BCA methodology approved by FEMA in writing <input type="checkbox"/> Not applicable
* What are the total project benefits?	\$
* What is the total project cost?	\$
* What is the benefit cost ratio (BCR) for the entire project?	
*Was sea level rise incorporated into the flood elevations in the BCA?	<input type="checkbox"/> Yes <input type="checkbox"/> No
*Were environmental benefits incorporated into the flood elevations in the BCA?	<input type="checkbox"/> Yes <input type="checkbox"/> No
*Were social benefits added to the project benefits?	<input type="checkbox"/> Yes <input type="checkbox"/> No
*Does the mitigation measure incorporate nature-based solutions?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Please provide any additional comments.	
Attachments: * Attach the Benefit Cost Analysis (BCA), if completed for this project	

Project Evaluation

- Community Rating System (CRS) Community, if so rating?
- Cooperating Tech Partner (CTP)
- Advance Assistance/Project Scoping into this project, provide identifier (State can assist)
- Building Code (State) and then Local
- ISO Building Code Effectiveness Grading Schedule (BCEGS) Rating 1-10 (1 being best)
- Partners Identified
- Future Conditions Identified
- If you are a Firewise Community – add this as well. NFPA - Firewise USA®

Evaluation

Evaluation	
* Is the applicant participating in the Community Rating System (CRS) ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, what is their CRS rating ?	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10
* Is the applicant a Cooperating Technical Partner (CTP) ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
* Was this created from a previous FEMA HMA Advance assistance/Project scoping award?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please provide the project identifier.	
* Has the recipient adopted building codes consistent with the International Codes ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, enter year of building code.	
If Yes, please provide the building code.	
* Have the applicant's building codes been assessed on the Building Code Effectiveness Grading Schedule (BCEGS) ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, what is their BCEGS rating ?	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10
* Describe involvement of partners to enhance the mitigation activity outcome.	
* Discuss how anticipated future conditions are addressed by this project.	
Additional comments (optional)	
Attachments	



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Environmental/Historic Preservation (EHP)

- An environmental/historic preservation review is required for all activities for which FEMA funds are being requested. FEMA will complete this review with the assistance of both the state government and the local applicant. It is important that you provide accurate information. If you are having problems completing this section, please contact your application point of contact.
- Buildings & Structures – Over 50 years of age, If yes, you must confirm that you have provided the following:
- Use FEMA R3 EHP Photo Guide

A. National Historic Preservation Act - Historic Buildings and Structures	
* 1. Does your project affect or is it in close proximity to any buildings or structures 50 years or more in age?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not known
If Yes, you must confirm that you have provided the following:	<input type="checkbox"/> The property address and original date of construction for each property affected (unless this information is already noted in the Properties section) <input type="checkbox"/> A minimum of <u>two color</u> photographs showing at least three sides of each structure (Please label the photos accordingly) <input type="checkbox"/> A diagram or USGS 1:24,000 scale quadrangle map displaying the relationship of the property(s) to the project area

https://www.fema.gov/sites/default/files/documents/fema_region-3_ehp_photo-guide-2020.pdf



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–Location

- Provide Detailed Description
- Latitude/Longitude
- Project Benefiting Area
- Project Impact Area
- Project Site Inventory

Project Location	
* Provide a detailed description of the proposed project's location.	
* Latitude (e.g. -80.430101, should be between -90 to +90, but not 0)	
* Longitude (e.g. 100.430101, should be between -180 to +180, but not 0)	
Attachments	

Project Benefiting Area	
* Provide a detailed description of the proposed	

Project Impact Area	
* Provide a detailed description of the proposed project's impact area	
Attachments	

Project Site Inventory	
* Does this project subapplication propose to mitigate a property/structure(s)? (Examples: residential home, commercial building, bridge, fire station, levee, pumping station, wastewater treatment plant, telephone pole, electric line, etc.)	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, do you know the location of the structure?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, enter the details of the property into the HMA Location Template spreadsheet, located at https://www.fema.gov/media-library-data/1591110757471-ecd329024debffd2dd5e2367938e90b2/FEMAHMALocationTemplate.xlsx	



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Project EHP Evaluation – Historic Properties

- Info gathered about the historic properties
- Consideration of how the project design will minimize adverse effects
- Acquisition/Demolition projects – data regarding the consideration & feasibility of elevation, relocation, or flood proofing as an alternative

A. National Historic Preservation Act - Historic Buildings and Structures

If Yes, to help FEMA evaluate the impact of the project, please indicate any other information you are providing.

- Information gathered about potential historic properties in the project area, including any evidence indicating the age of the building or structure and presence of buildings or structures that are listed or eligible for listing on the National Register of Historic Places or within or near a National Register listed or eligible historic district. Sources for this information may include the State Historic Preservation Officer, and/or the Tribal Historic Preservation Officer (SHPO/THPO), your local planning office, historic preservation organization, or historical society.
- Consideration of how the project design will minimize adverse effects on known or potential historic buildings or structures, and any alternatives considered or implemented to avoid or minimize effects on historic buildings or structures. Please address and note associated costs in your project budget.
- For acquisition/demolition projects affecting historic buildings or structures, any data regarding the consideration and feasibility of elevation, relocation, or flood proofing as alternatives to demolition.
- Attached materials or additional comments.

If Yes or Not Known, please provide an explanation and any information about this project that could assist FEMA in its review. (optional)

Attachments:



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Project EHP Eval - Archeological Resources

- Involve any ground disturbance
- If so, need info on what might be disturbed
- USGS 1:24,000 Scale Site Map
- Any potential for archeological sites in project area?
- If so, show site(s) in relationship to the project area.

B. National Historic Preservation Act - Archeological Resources	
* 1. Does your project involve disturbance of ground?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not known
If Yes, please confirm that you have provided the information below by selecting each checkbox. (If you have not provided these documents in any other section of the application, please attach the required documents below.)	<input type="checkbox"/> A description of the ground disturbance by giving the dimensions (area, volume, depth, etc.) and location. <input type="checkbox"/> The past use of the area to be disturbed, noting the extent of previously disturbed ground. <input type="checkbox"/> A USGS 1:24,000 scale or other site map showing the location and extent of ground disturbance.
If Yes, to help FEMA evaluate the impact of the project, please indicate below any other information you are providing. (optional)	<input type="checkbox"/> Any information about potential historic properties, including archeological sites, in the project area. Sources of this information may include SHPO/THPO, and/or the Tribe's cultural resources contact if no THPO is designated. Include, if possible, a map showing the relation of any identified historic properties to the project area. <input type="checkbox"/> Attached materials or additional comments.
If Yes or Not Known, please provide an explanation and any information about this project that could assist FEMA in its review. (optional)	
Attachments:	



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Project EHP Evaluation – Endangered Species

- Threatened or Endangered Species
- Information that you may have obtained to identify these threats
- <https://www.pgc.pa.gov/Wildlife/EndangeredandThreatened/Pages/default.aspx>
- What state and federal agencies you have contacted

C. Endangered Species Act and Fish and Wildlife Coordination Act	
* 1. Are Federally listed threatened or endangered species or their critical habitat present in the area affected by the project?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not known
C. Endangered Species Act and Fish and Wildlife Coordination Act	
If Yes, please confirm that you have provided the information below by selecting each checkbox. (If you have not provided these documents in any other section of the application, please attach the required documents below.)	<input type="checkbox"/> Information you obtained to identify species in or near the project area. Provide the source and date of the information cited.
If Yes, to help FEMA evaluate the impact of the project, please indicate below any other information you are providing. (optional)	<input type="checkbox"/> Any request for information and associated response from the USFWS, the National Marine Fisheries Service (NMFS) (for affected ocean-going fish), or your State Wildlife Agency, regarding potential listed species present and potential of the project to impact those species. <input type="checkbox"/> Attached materials or additional comments.
If Yes or Not Known, please provide an explanation and any information about this project that could assist FEMA in its review. (optional)	



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Project EHP Evaluation – Endangered Species

- Does your project remove or affect vegetation
- Description of amount of area removed or affected
- Photos and digital images needed
- Attached material

<p>* 2. Does your project remove or affect vegetation?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not known</p>
<p>If Yes, please confirm that you have provided the information below by selecting each checkbox. (If you have not provided these documents in any other section of the application, please attach the required documents below.)</p>	<p><input type="checkbox"/> Description of the amount (area) and type of vegetation to be removed or affected. <input type="checkbox"/> A site map showing the project area and the extent of vegetation affected. <input type="checkbox"/> Photographs or digital images that show both the vegetation affected and the vegetation in context of its surroundings.</p>
<p>If Yes, to help FEMA evaluate the impact of the project, please indicate below any other information you are providing. (optional)</p>	<p><input type="checkbox"/> Attached materials or additional comments.</p>
<p>If Yes or Not Known, please provide an explanation and any information about this project that could assist FEMA in its review. (optional)</p>	



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Project EHP Evaluation

- Does your project Remove or Affect Vegetation?
- Description of the Amount of Area affected
- Site Map
- Digital Color Photos

<p>* 2. Does your project remove or affect vegetation?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not known</p>
<p>If Yes, please confirm that you have provided the information below by selecting each checkbox. (If you have not provided these documents in any other section of the application, please attach the required documents below.)</p>	<p><input type="checkbox"/> Description of the amount (area) and type of vegetation to be removed or affected. <input type="checkbox"/> A site map showing the project area and the extent of vegetation affected. <input type="checkbox"/> Photographs or digital images that show both the vegetation affected and the vegetation in context of its surroundings.</p>
<p>If Yes, to help FEMA evaluate the impact of the project, please indicate below any other information you are providing. (optional)</p>	<p><input type="checkbox"/> Attached materials or additional comments.</p>
<p>If Yes or Not Known, please provide an explanation and any information about this project that could assist FEMA in its review. (optional)</p>	



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Project EHP Evaluation – Endangered Species

- Project in, near or likely to affect any type of waterway or body of water

<p>* 3. Is your project in, near (within 200 feet), or likely to affect any type of waterway or body of water?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not known</p>
<p>If Yes, and project is not within an existing building, you must confirm that you have provided the following: (If you have not provided these documents in any other section of the application, please attach the required documents below.)</p>	<p><input type="checkbox"/> A USGS 1:24,000 scale quadrangle map showing the project activities in relation to all nearby water bodies (within 200 feet). <input type="checkbox"/> Any information about the type of water body nearby including: its dimensions, the proximity of the project activity to the water body, and the expected and possible changes to the water body, if any. Identify all water bodies regardless whether you think there may be an effect <input type="checkbox"/> A photograph or digital image of the site showing both the body of water and the project area.</p>
<p>If Yes, to help FEMA evaluate the impact of the project, please indicate below any other information you are providing. (optional)</p>	<p><input type="checkbox"/> Evidence of any discussions with the US Fish and Wildlife Service (USFWS), and/or your State Wildlife Agency concerning any potential impacts if there is the potential for the project to affect any water body. <input type="checkbox"/> Attached materials or additional comments.</p>
<p>If Yes or Not Known, please provide an explanation and any information about this project that could assist FEMA in its review. (optional)</p>	



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Project EHP Evaluation – Clean Water Act, etc.

- Dredging involved?

D. Clean Water Act, Rivers and Harbors Act, and Executive Order 11990 (Protection of Wetlands) <input type="checkbox"/>	
* 1. Will the project involve dredging or disposal of dredged material, excavation, adding fill material or result in any modification to water bodies or wetlands designated as "waters of the U.S." as identified by the US Army Corps of Engineers or on the National Wetland Inventory?	Yes No Not known
If Yes, please confirm that you have provided the information below by selecting each checkbox. (If you have not provided these documents in any other section of the application, please attach the required documents below.)	Documentation of the project location on a USGS 1:24,000 scale topographic map or image and a copy of a National Wetlands Inventory map or other available wetlands mapping information.
If Yes, to help FEMA evaluate the impact of the project, please indicate below any other information you are providing. (optional)	Request for information and response letter from the US Army Corps of Engineers and/or State resource agencies regarding the potential for wetlands, and applicability of permitting requirements. Evidence of alternatives considered to eliminate or minimize impacts to wetlands. Attached materials or additional comments.
If Yes or Not Known, please provide an explanation and any information about this project that could assist FEMA in its review. (optional)	



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Project EHP Evaluation – Floodplain Management

- Executive Order 11988 Floodplain Management/NFIP
- Executive Order Federal Flood Risk Management Standard (FFRMS) EO 13690 Freeboard Addition (2ft/3ft – But check NOFO as well REF: .02% 500-year.
- Watercourse affected?
- Impact?

E. Executive Order 11988 (Floodplain Management)	
* 1. Does a Flood Insurance Rate Map (FIRM), Flood Hazard Boundary Map (FHBM), hydrologic study, or some other source indicate that the project is located in or will affect a 100 year floodplain, a 500 year floodplain if a critical facility, an identified regulatory floodway, or an area prone to flooding?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not known
If Yes, please indicate and/or provide any documentation to identify the means or the alternatives considered to eliminate or minimize impacts to floodplains (See the 8 step process found in 44 CFR Part 9.6.) to help FEMA evaluate the impact of the project.	
If Yes or Not Known, please provide an explanation and any information about this project that could assist FEMA in its review. (optional)	
* 2. Does the project alter a watercourse, water flow patterns, or a drainage way, regardless of its floodplain designation?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not known
If Yes, please indicate any other information you are providing to help FEMA evaluate the impact of the project.	<input type="checkbox"/> Hydrologic/hydraulic information from a qualified engineer to demonstrate how drainage and flood flow patterns will be changed and to identify down and upstream effects. <input type="checkbox"/> Request for information and response letter from the State water resource agency, if applicable, with jurisdiction over modification of waterways. <input type="checkbox"/> Attached materials or additional comments.
If Yes or Not Known, please provide an explanation and any information about this project that could assist FEMA in its review. (optional)	
Attachments:	



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Project EHP Evaluation – Coastal Management

- Coastal Zone Affected?
- More than 5 acres of prime or unique farmland outside of city limits affected
- Recourse Conservation & Recovery (RCRA) and Comprehensive Environmental Response Compensation & Liability Act (CERCLA) - Hazardous and Toxic Materials

F. Coastal Zone Management Act	
	<input type="checkbox"/> Attached materials or additional comments.
If Yes or Not Known, please provide an explanation and any information about this project that could assist FEMA in its review. (optional)	
Attachments:	

G. Farmland Protection Policy Act	
* 1. Will the project convert more than 5 acres of "prime or unique" farmland outside city limits to a non-agricultural use?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not known
If Yes or Not Known, please provide an explanation and any information about this project that could assist FEMA in its review. (optional)	
Attachments:	

H. Resource Conservation and Recovery Act (RCRA) and Comprehensive Environmental Response Compensation and Liability Act (CERCLA) (Hazardous and Toxic Materials)	
* 1. Is there a reason to suspect there are contaminants from a current or past use on the property associated with the proposed project?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not known
If Yes, please indicate any other information you are providing to help FEMA evaluate the impact of the project.	<input type="checkbox"/> Comments and any relevant documentation. <input type="checkbox"/> Results of any consultations with State or local agency to obtain permit with



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– EO 12898 Environmental Justice for Low Income & Minorities

- Low income or minority population affected?
- Other Environmental /Historic Preservation Laws or issues?
- Use of CDC/ATSDR Social Vulnerability Index

<https://www.atsdr.cdc.gov/placementandhealth/svi/index.html>

I. Executive Order 12898, Environmental Justice for Low Income and Minority Populations	
* 1. Are there low income or minority populations in the project's area of effect or adjacent to the project area?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not known
If Yes, you must confirm that you have provided the following:	<input type="checkbox"/> Description of any disproportionate and adverse effects to these populations.
To help FEMA evaluate the impact of the project, please indicate below any other information you are providing:	<input type="checkbox"/> Description of the population affected and the portion of the population that would be disproportionately and adversely affected. Please include specific efforts to address the adverse impacts in your proposal narrative and budget. <input type="checkbox"/> Attached materials or additional comments.
If Yes or Not Known, please provide an explanation and any information about this project that could assist FEMA in its review.	
Attachments:	

J. Other Environmental/Historic Preservation Laws or Issues	
* 1. Are there other environmental/historic preservation requirements associated with this project that you are aware of?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, please indicate a description of the requirements, issues, or public involvement effort.	
* 2. Are there controversial issues associated with this project?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not known



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Other Environmental/HP Laws/Issues/Summary

- Descriptions of possible requirements
- Public Meetings (do you have an advertisement to plug in here?)
- Any Potential Impacts? Remember STAPLEE (*Social, Technical, Administrative, Political, Legal, Economic and Environmental issues*)

J. Other Environmental/Historic Preservation Laws or Issues	
<input type="checkbox"/> If Yes, please indicate a description of the requirements, issues, or public involvement effort.	
If Yes or Not Known, please indicate why in the text box below and any information about this project that could assist FEMA in its review.	
* 3. Have you conducted any public meeting or solicited public input or comments on your specific proposed mitigation project?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, please indicate a description of the requirements, issues, or public involvement effort.	
Attachments:	

K. Summary and Cost of Potential Impacts	
* 1. Having answered the questions in parts A. through J., have you identified any aspects of your proposed project that have the potential to impact environmental resources or historic properties?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, you must confirm that you have provided the following: (If you have not provided these documents in any other section of the application, please attach the required documents below.)	<input type="checkbox"/> Evaluated these potential effects and provided the materials required in Parts A through J that identify the nature and extent of potential impacts to environmental resources and/or historic properties. <input type="checkbox"/> Consulted with appropriate parties to identify any measures needed to avoid or minimize these impacts. <input type="checkbox"/> Considered alternatives that could minimize both the impacts and the cost of the project. <input type="checkbox"/> Made certain that the costs of any measures to treat adverse effects are realistically



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Other Environmental/HP Laws/Issues/Summary

- Descriptions of possible requirements
- Public Meetings
- Any Potential Impacts?

J. Other Environmental/Historic Preservation Laws or Issues

If Yes, please indicate a description of the requirements, issues, or public involvement effort.

If Yes or Not Known, please indicate why in the text box below and any information about this project that could assist FEMA in its review.

* 3. Have you conducted any public meeting or solicited public input or comments on your specific proposed mitigation project?

Yes
 No

If Yes, please indicate a description of the requirements, issues, or public involvement effort.

Attachments:

K. Summary and Cost of Potential Impacts

reflected in the project budget estimate.

If Yes, please enter your comments. (optional)
(Please indicate why and any information about this project that could assist FEMA in its review.)

K. Summary and Cost of Potential Impacts

* 1. Having answered the questions in parts A. through J., have you identified any aspects of your proposed project that have the potential to impact environmental resources or historic properties?

Yes
 No

If Yes, you must confirm that you have provided the following:

(If you have not provided these documents in any other section of the application, please attach the required documents below.)

- Evaluated these potential effects and provided the materials required in Parts A through J that identify the nature and extent of potential impacts to environmental resources and/or historic properties.
- Consulted with appropriate parties to identify any measures needed to avoid or minimize these impacts.
- Considered alternatives that could minimize both the impacts and the cost of the project.
- Made certain that the costs of any measures to treat adverse effects are realistically



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Assurances & Certifications

- Applicants should refer to the regulations cited below to determine the certification to which they are required to attest.
- Applicants should also review the instructions for certification included in the regulations before completing this form

Lobbying

As required by section 1352, Title 31 of the U.S. Code, and implemented at 44 CFR Part 18, for persons entering into a grant or cooperating agreement over \$ 100,000, as defined at 44 CFR Part 18, the applicant certifies that:

(a) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the making of any Federal grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal grant or cooperative agreement.

(b) If any other funds than Federal appropriated funds have been paid or will be paid to any other person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or an employee of Congress, or employee of a member of Congress in connection with this Federal Grant or cooperative agreement, the undersigned shall complete and submit Stand Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

(c) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subgrants, contracts

Applicant will NOT use federal appropriated funds for lobbying purposes.

Applicant will use non-appropriated funds for lobbying purposes. If so, complete Standard Form LLL "Disclosure of Lobbying Activities" below.



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Assurances & Certifications

- Applicants should refer to the regulations cited below to determine the certification to which they are required to attest.
- Applicants should also review the instructions for certification included in the regulations before completing this form
- There is a Lobby form and 3 pages of questions...

Lobbying

As required by section 1352, Title 31 of the U.S. Code, and implemented at 44 CFR Part 18, for persons entering into a grant or cooperating agreement over \$ 100,000, as defined at 44 CFR Part 18, the applicant certifies that:

(a) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the making of any Federal grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal grant or cooperative agreement.

(b) If any other funds than Federal appropriated funds have been paid or will be paid to any other person for influencing or attempting to influence an officer or employee of any agency, a member of Congress, an officer or an employee of Congress, or employee of a member of Congress in connection with this Federal Grant or cooperative agreement, the undersigned shall complete and submit Stand Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

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Applicant will NOT use federal appropriated funds for lobbying purposes.

Applicant will use non-appropriated funds for lobbying purposes. If so, complete Standard Form LLL "Disclosure of Lobbying Activities" below.



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Drug Free Workplace

- As required by the Drug-Free Workplace Act of 1988, and implemented at 44 CFR Part 17, Subpart F, for grantees, as defined at 44 CFR Part 17.615 and 17.620.

3. Drug-Free Workplace (Grantee other than individuals)

As required by the Drug-Free Workplace Act of 1988, and implemented at 44 CFR Part 17, Subpart F, for grantees, as defined at 44 CFR Part 17.615 and 17.620.

A. The applicant certifies that it will continue to provide a drug-free workplace by;

(a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;

(b) Establishing an on-going drug free awareness program to inform employees about

- (1) The dangers of drug abuse in the workplace;
- (2) The grantee's policy of maintaining a drug-free workplace;
- (3) Any available drug counseling, rehabilitation, and employee assistance programs; and



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Review/Compliance & Maintenance Letters

- Use letterhead with official signature
- Local subdivision where project is located must attest to assurances:
 - Project complies with all local municipal codes, ordinances and regulations
 - Project does not adversely affect low income or minority individuals
 - Must have a Maintenance Agreement (also in application with costs for three years (#5),
 - Signed by Municipal Official (not engineers, project contractors



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Finalize Application Package

- Add a cover letter
 - For acquisitions and elevations, cover letter must contain address list of properties including substitution properties
 - Indicate if property is “main” or “substitute”
- Package all property information together by street address
- Submit paper copy of entire application package
- Provide a digital copy on a **Thumbdrive** for review
- Make a copy for your records (for audits)



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Questions?



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ND Program Support Materials

BRIC

- [Mitigation Action Portfolio](#)
- BRIC Building Codes Activities
- BRIC Partnership Activities
- BRIC Project Scoping Activities
- BRIC Mitigation Planning Activities
- BRIC Direct Technical Assistance
- BRIC Technical Criteria
- BRIC Qualitative Criteria
- HMA Cost Share Guide
- FY23 BRIC Notice of Funding Opportunity



FMA

- FMA Community Flood Mitigation Project Fact Sheet
- FMA Community Flood Mitigation Benefitting Area Map Development
- FMA Project Scoping Fact Sheet
- GEOSPATIAL FILE ELIGIBILITY CRITERIA IN FLOOD MITIGATION GRANT APPLICATIONS
- FY23 FMA Notice of Funding Opportunity
- Unified Hazard Mitigation Assistance Guidance & Addendum
- Property Elevation and Acquisition Job Aides:
 - Elevation Job Aid
 - Acquisition & Demolition Job Aid
 - Acquisition & Relocation
- HMA Cost Share Guide



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