OMB Control Number FF-104-FY-22-243 Expires Month Date Year

PROJECT APPLICATION FOR BUILDING CODE AND FLOODPLAIN MANAGEMENT ADMINISTRATION AND ENFORCEMENT

Paperwork Burden Disclosure Notice

Public reporting burden for this data collection is estimated to average 14 minutes per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and submitting this form. This collection of information is required to obtain or retain benefits. You are not required to respond to this collection of information unless a valid OMB control number is displayed in the upper right corner of this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing the burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 500 C Street, SW., Washington, DC 20472, Paperwork Reduction Project (1660-0017) NOTE: Do not send your completed form to this address.

Privacy Act Statement

The collection of this information is authorized by the Robert T. Stafford Disaster Relief and Emergency Assistance Act, §§ 402-403, 406-407, 417, 423, 427, 428, 502, and 705; 42 U.S.C. 5170a-b, 5172-73, 5184, 5189a, 5189e, 5189f, 5192, 5205; and 2 C.F.R. § 200. This information is collected to provide assistance to eligible jurisdictions and organizations to facilitate the response to and recovery from a Presidentially-declared disaster or emergency, or to provide assistance for hazard mitigation measures during the recovery process. The disclosure of information on this form is voluntary; however, failure to provide the requested information may delay or prevent the agency from receiving funds from FEMA's Public Assistance program.

Purpose and Applicability

Building code and floodplain management administration and enforcement activities related to the repair, replacement or retrofit of disaster-damaged structures in the jurisdiction of the Applicant may be eligible for Public Assistance funding. This may include public and private structures. FEMA uses this form to collect information necessary to support the Applicant's claim. For more information, please see Applying for Building Code Administration and Enforcement Reimbursement through Please Contact the State, local, Tribal, or Territorial emergency management office for additional information.

Recipients and Applicants should use Public Assistance Grants Portal to submit all documentation and information to FEMA. Questions are displayed in an intuitive manner to show the information and documentation needed based on answers provided. All signatures are official and legally binding.

The following information is needed to complete this form:

- The specific activities [to be] conducted
- When, where, and by whom the activities were [will be] completed
- Estimated or actual cost information

Section I – Applicant Information			
Declaration # [system generated]	Legal name of Applicant [system generated]	FEMA PA ID [system generated]	
	Section II – Project Informatior	1	
Project # [system generated]	Applicant-Assigned Project # (optional)	Project Title:	
Project Amendment # [system generated]	Period of Performance deadline: [system generated]	Work Type: Building Code and Floodplain Management Administration and Enforcement	
Location: Throughout jurisdiction [system generated]			
Do you want to make this impact a high priority? High priority means that FEMA will work with you to address this impact before any others you list. Please update if changed. [system generated]			
□ No			

☐ Yes

Section III - Small Project

This section is completed for projects with total costs less than the large project threshold.			
Description of Activities			
Which of the following activities were [will be] performed? Please select all that apply.			
☐ Building code administration. Please describe or select from the eligible activities below:			
☐ Collect fees.			
\square Contract for services (e.g., contract planning, initiation, solicitation, evaluation, and award).			
☐ Coordinate building code administration and enforcement with floodplain management regulation administration and enforcement, as appropriate.			
☐ Establish construction plan review and inspection processes, procedures, and instructions for permit holders.			
\square Hire, train, supervise, certify, and license staff, as required to conduct eligible activities.			
☐ Monitor impacted areas for unpermitted construction activities.			
☐ Process requests for building code variances.			
\square Provide training and information to staff, contractors, and the public on unique considerations for repair of disaster-damaged buildings 45 years or older.			
\square Provide training and outreach to the public on building code and building permit requirements applicable to the repair, replacement, or retrofit of disaster-damaged buildings.			
\square Review and process applications for building permits; certificates of occupancy; certificates of			
compliance; and the associated plans, specifications, and construction documents for compliance with federal, state, and municipal building, housing, and life-safety codes and standards applicable to disaster-related repair, replacement, or retrofit.			
☐ Code enforcement. Please describe or select from the eligible activities below:			
☐ Conduct and process condemnation determinations.			
\Box Identify and carry out corrective action in cases where construction, design, and occupancy does not comply with codes and ordinances.			
☐ Inspect structures under construction for compliance with approved plans, specifications, and all requirements of applicable codes, laws, and ordinances.			
☐ Investigate complaints and assist in preparation of materials for abating violations of building codes and related ordinances.			
☐ Review and issue elevation certificates.			
☐ Floodplain management ordinance administration and enforcement. Please describe or select from			
the eligible activities below:			
\square Conduct inspections to ensure the removal of temporary fill and related materials used in flood fighting.			
☐ Contract for services (e.g., contract planning, initiation, solicitation, evaluation, and award).			
\square Coordinate floodplain management ordinance administration and enforcement with building code administration and enforcement, as appropriate.			
\Box Determine whether proposed disaster-related development activities are in areas regulated by the community's floodplain management ordinance or building code.			
☐ Enforce or administer standards for development according to community floodplain management			

regulations. \Box Hire, train, supervise, certify, and license staff, as required to conduct eligible activities.		
☐ Inspect all disaster-related development in the applicable jurisdiction.		
☐ Monitor impacted areas for unpermitted construction activities.		
☐ Process, maintain, and track temporary occupancy permits and inspect temporary occupancy		
buildings.		
☐ Process permits for disaster-related development in the floodplain associated with the declared disaster.		
☐ Process requests for floodplain management ordinance variances.		
☐ Provide information on flood hazards, floodplain map data, advisory flood data, and compliance to residents and property owners.		
\Box Provide training and information to staff, contractors, and the public on unique considerations for repair of disaster-damaged buildings 45 years or older.		
☐ Provide training and outreach to the public on floodplain permit requirements applicable to the repair, replacement, or retrofit of disaster-damaged buildings.		
☐ Review disaster-related development proposals to ensure compliance with the requirements of applicable floodplain management ordinances.		
☐ Take corrective action necessary to ensure compliance with Federal, State, and Local floodplain regulations.		
☐ Substantial damage determinations. <i>Please describe or select from the eligible activities below:</i>		
☐ Collect field data for damage assessments.		
☐ Conduct damage inventory of structures.		
☐ Conduct initial field surveys to determine extent of damage		
\Box Determine if damaged structures have been designated as historic or that may be eligible for such designation.		
☐ Determine whether proposed improvements are "substantial improvements" and trigger requirements for compliance, including a building permit.		
\Box Enter damage inventory administrative data into the Substantial Damage Estimator or comparable data collection software.		
\square Establish damage trends to identify areas to focus building-specific assessment efforts.		
\square Hire, train, supervise, certify, and license staff, as required to conduct eligible activities.		
\square Inform property owners of damage determination and provide compliance requirements.		
\Box Perform inspections to ensure compliance with repair and substantial damage construction requirements.		
\Box Prepare cost information on repairs and pre-disaster market value estimates for substantial damage estimates.		
☐ Review, adjudicate, and resolve Substantial Damage Determination appeals.		
\square Track cumulative substantial damage and repetitive loss for communities.		
☐ Other. <i>Please describe</i> :		
General Cost and Work Status Information		
Has the Applicant started any of the work activities claimed on this project application? [system generated]		

DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency Expires Month Date Year ☐ All work is complete. Please provide work start and end dates (MM/DD/YYYY) - (MM/DD/YYYY) ☐ Work has started and is approximately % complete. Please provide the start date and a projected end date, if known: (MM/DD/YYYY) - (MM/DD/YYYY) ☐ Work has not started. Please provide a projected start date: (MM/DD/YYYY) Has [Does] the Applicant received [anticipate receiving] funding from another source for this work? Please update if changed. [system generated] □ No \square Yes. Please check all that apply: ☐ Cash Donations. *Please describe*: Amount \$ ☐ Federal Grants. *Please describe*: Amount \$ ☐ Non-Federal Grants. *Please describe:* Amount \$ ☐ Revenue. *Please describe*: Amount \$ **Cost Estimate** Please upload an itemized cost estimate for this project. Please include the number and type of resources necessary to complete the work. What is the basis for the estimate? □ Actual costs ☐ Historical unit costs ☐ Average costs for similar work in the area ☐ Contractor or vendor quotes ☐ Other. Please describe: What resources did [will] the Applicant use to complete the work? Please select all that apply. ☐ Contracted Has the Applicant procured and selected a contractor? ☑ Yes How did the Applicant ensure the contract costs were reasonable? ☐ Competitive procurement process ☐ Cost or price analysis ☐ Compared to historical costs for similar projects in the area ☐ Other. Please describe: What is the total cost of contracted work? **Completed Cost Future Cost Total Cost** \$ \$ [system calculated] ☐ Labor ☐ Applicant's own employees

What is the total cost of employee labor?

+

\$

Future Cost

Completed Cost

Total Cost

☐ Mutual aid, prison labor, or national guard What is the total cost of mutual aid, prison labor, or national guard? **Completed Cost Future Cost Total Cost Mutual Aid** \$ \$ Prison Labor \$ **National Guard** ☐ Equipment ☐ Applicant's own equipment ☐ Purchased or rented equipment Has the Applicant completed the purchase or rental? □ No ☐ Yes How did the Applicant ensure the costs were reasonable? ☐ Cost or price analysis ☐ Compared to historical costs for similar projects in the area ☐ Obtained multiple quotes ☐ Other. Please describe: What is the total cost of equipment? **Completed Cost Future Cost Total Cost** \$ \$ □ Materials ☐ From Stock □ Purchased Has the Applicant completed the purchase? ☐ Yes How did the Applicant ensure the costs were reasonable? ☐ Cost or price analysis ☐ Compared to historical costs for similar projects in the area ☐ Obtained multiple quotes ☐ Other. Please describe: What is the total cost of materials? **Completed Cost Future Cost Total Cost** \$ □ Donated Resources ☐ Labor ☐ Equipment ☐ Materials

Federal Emergency Management Ag	gency	Expires Month Date Year		
\square Buildings or Land				
□ Permanent				
☐ Temporary				
☐ Space				
☐ Logistical Support				
5				
What is the total value?				
Completed Cost	+ Future Cost =	Total Cost		
\$				
_				
_	oodplain management administration	on and enforcement cost		
☐ Travel				
☐ Miscellaneous. <i>Please desc</i>	ribe:			
☐ Other. <i>Please describe:</i>				
	litional Building Code and Floodplair	n Management Administration and		
Enforcement costs?	. Future Cost	Total Cost		
Completed Cost	+ \$ Future Cost = \$	Total Cost		
Ψ				
		Total Cost Claim		
\$ [system calculated]				
Section	n IX - Small Project Closeout F	Request		
Has the Applicant completed all th	ne work associated with the project?			
□No				
☐ Yes. Work Completed date: (MN	M/DD/YYYY)			
Does the Applicant want to clos	se this project or other small projects	s as well?		
☐ Applicant wants to closeout this project only.				
☐ Applicant wants to closeout multiple small projects.				
☐ Applicant wants to closeout a	all small projects.			
The Applicant may request additional funding if its combined actual cost of all its Small Projects				
	A approved for all its Small Projects.			
	amount obligated? [system generate	ed for the small project with the		
latest period of performance]				
□ No				
	pload all documentation to support	work and costs for all small		
projects.	E. J. and all and a Different and the con-	Bara de la constanta de la con		
Total approved amount [system	Federal share obligated [system	Date obligated [system		
generated]	generated]	generated]		
Section V – Large Project				
Description of Activities				
Which of the following activities we	ere [will be] performed?			

☐ Building code administration
☐ Collect fees.
\square Contract for services (e.g., contract planning, initiation, solicitation, evaluation, and award).
\Box Coordinate building code administration and enforcement with floodplain management regulation administration and enforcement, as appropriate.
\square Establish construction plan review and inspection processes, procedures, and instructions for permit holders.
☐ Hire, train, supervise, certify, and license staff, as required to conduct eligible activities.
☐ Monitor impacted areas for unpermitted construction activities.
☐ Process requests for building code variances.
\Box Provide training and information to staff, contractors, and the public on unique considerations for repair of disaster-damaged buildings 45 years or older.
□ Provide training and outreach to the public on building code and building permit requirements applicable to the repair, replacement, or retrofit of disaster-damaged buildings.
□ Review and process applications for building permits; certificates of occupancy; certificates of compliance; and the associated plans, specifications, and construction documents for compliance with federal, state, and municipal building, housing, and life-safety codes and standards applicable to disaster-related repair, replacement, or retrofit.
☐ Code enforcement
☐ Conduct and process condemnation determinations.
\Box Identify and carry out corrective action in cases where construction, design, and occupancy does not comply with codes and ordinances.
☐ Inspect structures under construction for compliance with approved plans, specifications, and all requirements of applicable codes, laws, and ordinances.
\square Investigate complaints and assist in preparation of materials for abating violations of building codes and related ordinances.
☐ Review and issue elevation certificates.
☐ Floodplain management ordinance administration and enforcement
\Box Conduct inspections to ensure the removal of temporary fill and related materials used in flood fighting.
\square Contract for services (e.g., contract planning, initiation, solicitation, evaluation, and award).
☐ Coordinate floodplain management ordinance administration and enforcement with building code administration and enforcement, as appropriate.
☐ Determine whether proposed disaster-related development activities are in areas regulated by the community's floodplain management ordinance or building code.
\Box Enforce or administer standards for development according to community floodplain management regulations.
☐ Hire, train, supervise, certify, and license staff, as required to conduct eligible activities.
☐ Inspect all disaster-related development in the applicable jurisdiction.
☐ Monitor impacted areas for unpermitted construction activities.
☐ Process, maintain, and track temporary occupancy permits and inspect temporary occupancy buildings.
☐ Process permits for disaster-related development in the floodplain associated with the declared

disaster.
☐ Process requests for floodplain management ordinance variances.
☐ Provide information on flood hazards, floodplain map data, advisory flood data, and compliance to
residents and property owners.
\square Provide training and information to staff, contractors, and the public on unique considerations for repair of disaster-damaged buildings 45 years or older.
\square Provide training and outreach to the public on floodplain permit requirements applicable to the repair, replacement, or retrofit of disaster-damaged buildings.
\square Review disaster-related development proposals to ensure compliance with the requirements of applicable floodplain management ordinances.
\Box Take corrective action necessary to ensure compliance with Federal, State, and Local floodplain regulations.
☐ Substantial damage determinations
☐ Collect field data for damage assessments.
☐ Conduct damage inventory of structures.
☐ Conduct initial field surveys to determine extent of damage
\Box Determine if damaged structures have been designated as historic or that may be eligible for such designation.
☐ Determine whether proposed improvements are "substantial improvements" and trigger requirements for compliance, including a building permit.
\Box Enter damage inventory administrative data into the Substantial Damage Estimator or comparable data collection software.
\square Establish damage trends to identify areas to focus building-specific assessment efforts.
☐ Hire, train, supervise, certify, and license staff, as required to conduct eligible activities.
\square Inform property owners of damage determination and provide compliance requirements.
$\hfill\square$ Perform inspections to ensure compliance with repair and substantial damage construction requirements.
\Box Prepare cost information on repairs and pre-disaster market value estimates for substantial damage estimates.
☐ Review, adjudicate, and resolve Substantial Damage Determination appeals.
☐ Track cumulative substantial damage and repetitive loss for communities.
☐ Other. <i>Please describe</i> :
Please provide documentation to substantiate the activities related to building code ordinance

Please provide documentation to substantiate the activities related to building code ordinance administration and enforcement for disaster-damaged properties as applicable:

- List of addresses where enforcement activities took place.
- Evidence that these addresses were damaged as a result of the incident.
- Evidence that the activities being claimed are related only to incident-related damage (e.g., activity logs to show that employees were assigned to inspect disaster-damaged addresses).
- · Activity logs and sign-in sheets to document training and outreach activities.

Please describe the scope of work for any activity selected above or upload documentation with at least the same level of information:

Please upload any design drawings, sketches, technical surveys, or reports.

General Cost and Work Status Information			
Has the Applicant started any of the work activities claimed on this project application? [system generated]			
☐ All work is complete. <i>Please provide work start and end dates</i> (MM/DD/YYYY) - (MM/DD/YYYY)			
☐ Work has started and is approximately % complete. Please provide the start date and a projected			
end date, if known: (MM/DD/YYYY) - (MM/DD/YYYY)			
☐ Work has not started. Please provide a projected start date: (MM/DD/YYYY)			
Please indicate what type of cost was used for this project: Please select all that apply:			
☐ Actual cost. Please complete actual cost table below.			
☐ Estimate for future cost.			
☐ Estimated contracted cost: \$			
☐ Estimated labor cost: \$			
☐ Estimated equipment cost: \$			
☐ Estimated materials cost: \$			
☐ Estimated other costs: \$			
Has [Does] the Applicant received [anticipate receiving] funding from another source for this work? Please update if changed. [system generated]			
□ No			
☐ Yes. Please check all that apply:			
☐ Cash Donations. <i>Please describe:</i> Amount \$			
☐ Federal Grants. <i>Please describe:</i> Amount \$			
☐ Non-Federal Grants. <i>Please describe:</i> Amount \$			
☐ Revenue. <i>Please describe:</i> Amount \$			
Actual Cost Information			
What resources did the Applicant use to complete the work? Please select all that apply.			
□ Contracted			
□ Labor			
□ Equipment			
☐ Materials			
☐ Additional Building Code and Floodplain Management Administration and Enforcement costs			
Contracted Costs			
Please complete the Contract Information form for all contracts that have an estimated value of more than \$1,000,000.			
Has the Applicant procured and selected a contractor?			
□ No			
☐ Yes. How did the Applicant ensure the contract costs were reasonable? Please upload a copy of the			
awarded contract, bid package, any change orders, and invoices.			
☐ Cost or price analysis			
☐ Compared to historical costs for similar projects in the area			
☐ Obtained multiple quotes			
☐ Other. Please describe:			

DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency

OMB Control Number FF-104-FY-22-243 Expires Month Date Year

Name of Individual	Labor and Equipment						
Name of Individual	Rate type [optional if claiming	g					
☐ Donated labor	equipment]	<u> </u>					
☐ Applicant employee	☐ Straight time \$						
☐ Mutual aid	☐ Overtime \$						
☐ Emergency Management	☐ Premium \$						
Assistance Compact (EMAC).	□ Hazard \$						
Please upload the following	L Hazara ¢						
documents: • EMAC Resource Support			tal hours:	Total Cost			
Agreement.		Dete(e)	oor hours:	Labor cost \$			
• R-1 form		Equir	ment hours:	Equipment cost \$			
• R-2 form		Houre	otal hours:	Donated value \$			
Signed Proof of Payment			stem calculated]	Total cost \$			
			Sterri calculated]	[system calculated]			
Other:	le the Applicant eleiming						
Equipment Description and source	Is the Applicant claiming mileage or hourly rate?						
☐ Applicant owned	☐ Mileage						
☐ Purchased	☐ Equipment \$						
□ Rented	L Equipment \$						
□ Donated							
How did the Applicant ensure the cos	sts were reasonable?						
☐ Cost or price analysis							
☐ Compared to historical costs for si	milar projects in the area						
☐ Obtained multiple quotes	1 311						
☐ Other. Please describe:							
	Mat	erials					
Material description How was the	e material obtained?	Purchased Date (MM	1/DD/YYYY) Used [Date (MM/DD/YYYY)			
□ Donated		, and a second	, , , , , , , , , , , , , , , , , , , ,	, a.c. (, 22,)			
☐ Purchase	d						
☐ From Sto	ck						
	O. a. atta. Ha						
Quantity Purchased Unit Price	e Quantity Use	d Fair M	arket Value	Total Cost			
Quantity Purchased Unit Pric	Quantity Use	d Fair M	arket Value	Donated value \$			
Quantity Purchased Unit Pric	Quantity Use	d Fair M	arket Value	Donated value \$ Total cost \$			
		d Fair M	arket Value	Donated value \$			
How did the Applicant ensure the cos		d Fair M	arket Value	Donated value \$ Total cost \$			
How did the Applicant ensure the cos ☐ Cost or price analysis	sts were reasonable?	d Fair M	arket Value	Donated value \$ Total cost \$			
How did the Applicant ensure the cos ☐ Cost or price analysis ☐ Compared to historical costs for si	sts were reasonable?	d Fair M	arket Value	Donated value \$ Total cost \$			
How did the Applicant ensure the cos ☐ Cost or price analysis ☐ Compared to historical costs for si ☐ Obtained multiple quotes	sts were reasonable?	d Fair M	arket Value	Donated value \$ Total cost \$			
How did the Applicant ensure the cos ☐ Cost or price analysis ☐ Compared to historical costs for si ☐ Obtained multiple quotes ☐ Other. Please describe:	sts were reasonable? milar projects in the area			Donated value \$ Total cost \$ [system calculated]			
How did the Applicant ensure the cos Cost or price analysis Compared to historical costs for si Obtained multiple quotes Other. Please describe: Additional Building	sts were reasonable?		ation and Enforce	Donated value \$ Total cost \$ [system calculated] ment costs			
How did the Applicant ensure the cos Cost or price analysis Compared to historical costs for si Obtained multiple quotes Other. Please describe: Additional Building	sts were reasonable? milar projects in the area Code and Floodplain Mana	gement Administr	ation and Enforce	Donated value \$ Total cost \$ [system calculated] ment costs			
How did the Applicant ensure the cos Cost or price analysis Compared to historical costs for si Obtained multiple quotes Other. Please describe: Additional Building Description Vendor Pt	sts were reasonable? milar projects in the area Code and Floodplain Mana	gement Administr	ation and Enforce	Donated value \$ Total cost \$ [system calculated] ment costs			
How did the Applicant ensure the cos Cost or price analysis Compared to historical costs for si Obtained multiple quotes Other. Please describe: Additional Building Description Travel	sts were reasonable? milar projects in the area Code and Floodplain Mana	gement Administr	ation and Enforce	Donated value \$ Total cost \$ [system calculated] ment costs Total Cost			
How did the Applicant ensure the cos Cost or price analysis Compared to historical costs for si Obtained multiple quotes Other. Please describe: Additional Building Description Travel Meals	sts were reasonable? milar projects in the area Code and Floodplain Mana	gement Administr	ation and Enforce	Donated value \$ Total cost \$ [system calculated] ment costs Total Cost			
How did the Applicant ensure the cost Cost or price analysis Compared to historical costs for si Obtained multiple quotes Other. Please describe: Additional Building Description Travel Meals Miscellaneous Please describe:	cits were reasonable? milar projects in the area Code and Floodplain Mana irchased date Used Date	gement Administr Quantity Purchase	ation and Enforce d Fair Market Value	Donated value \$ Total cost \$ [system calculated] ment costs Total Cost			
How did the Applicant ensure the cost Cost or price analysis Compared to historical costs for si Obtained multiple quotes Other. Please describe: Additional Building Description Travel Meals Miscellaneous Please describe:	sts were reasonable? milar projects in the area Code and Floodplain Mana	gement Administr Quantity Purchase	ation and Enforce d Fair Market Value	Donated value \$ Total cost \$ [system calculated] ment costs Total Cost			
How did the Applicant ensure the cost Cost or price analysis Compared to historical costs for si Obtained multiple quotes Other. Please describe: Additional Building Description Travel Meals Miscellaneous Please describe:	code and Floodplain Manaurchased date Code and Floodplain Manaurchased date Used Date	gement Administr Quantity Purchase	ation and Enforce d Fair Market Value	Donated value \$ Total cost \$ [system calculated] ment costs Total Cost			
How did the Applicant ensure the cost or price analysis Compared to historical costs for si Obtained multiple quotes Other. Please describe: Additional Building Description Travel Meals Miscellaneous Please describe:	code and Floodplain Manaurchased date Code and Floodplain Manaurchased date Used Date	gement Administr Quantity Purchase	ation and Enforce d Fair Market Value	Donated value \$ Total cost \$ [system calculated] ment costs Total Cost			
How did the Applicant ensure the cost or price analysis Compared to historical costs for si Obtained multiple quotes Other. Please describe: Additional Building Description Travel Meals Miscellaneous Please describe: Solution	code and Floodplain Manaurchased date Code and Floodplain Manaurchased date	gement Administr Quantity Purchase Vork and Cost ummary	ation and Enforce d Fair Market Value	Donated value \$ Total cost \$ [system calculated] ment costs Total Cost			

OMB Control Number FF-104-FY-22-243 Expires Month Date Year

Estimated Costs	Closeout Final Costs	
[system calculated below]	[system calculated below] Contract:	
Contract:	Contract:	
Labor	Labor	
☐ Applicant's own employees:	☐ Applicant's own employees:	
☐ Mutual Aid:	☐ Mutual Aid:	
Equipment:	Equipment:	
☐ Applicant's own equipment:	☐ Applicant's own equipment:	
☐ Purchased equipment:	☐ Purchased equipment:	
☐ Rented equipment:	☐ Rented equipment:	
Materials:	Materials:	
☐ Stock materials:	☐ Stock materials:	
☐ Purchased materials:	☐ Purchased materials:	
	Z / G/S/IGGG / I/G/G/IG/G/	
Additional Building Code and Floodplain	Additional Building Code and Floodplain	
Management Administration and Enforcement	Management Administration and Enforcement	
costs	costs	
☐ Travel:	☐ Travel:	
☐ Meals:	☐ Meals:	
☐ Miscellaneous:	☐ Miscellaneous:	
Deductions:	Deductions:	
☐ Other sources:	☐ Other sources:	
Donated Resources:	Donated Resources:	
□ Labor:	☐ Labor:	
☐ Equipment:	☐ Equipment:	
☐ Material:	☐ Material:	
☐ Buildings or Land:	☐ Buildings or Land:	
☐ Space:	☐ Space:	
☐ Logistical Support:	☐ Logistical Support:	
☐ Total value:	☐ Total value:	
Grand Total:	Grand Total:	
Section VII - Additional Inform	nation and Comments [optional]	
	ting documentation not previously provided, use this	
section to help support your claim. Please ensure personally identifiable information is redacted on any		
documentation submitted. ¹ Please provide any additional information, commer	ots or a brief description of the unloaded	
documentation, if applicable:	io, or a prior accomption of the appoace	
	ledgements and Certifications	

¹ Functionality: Optional not required.

I acknowledge and certify that I have reviewed and understand the following information regarding overarching requirements to receive Public Assistance. Please initial next to each statement.

The State, local, Tribe, or Territory represented has not been suspended or sanctioned and are in good standing with the <u>National Flood Insurance Program (NFIP)</u>.

This project application does not claim any activities conducted through the Substantial Damage Data Collection Contract.

The requirement to comply with applicable Federal, State, local, Tribal, and Territorial laws, regulations, and executive orders. Non-compliance may result in denial or de-obligation of funding. This includes but is not limited to laws prohibiting discrimination; complying with the most restrictive of its own documented policies and procedures used for procurements with non-Federal funds; Federal procurement and contracting laws in accordance with 2 C.F.R. §§ 200, compliance with the Environmental Protection Agency guidelines for procurement of recovered materials; environmental and historic preservation laws; and inclusion of required provisions as applicable.

Applicants must maintain all source documentation for each Project for 3 years after the date of transmission of the Closeout Form as certified by the Recipient. Recipients must keep all financial and program documentation for 3 years after the date it submits the final SF-425, in accordance with Title 2 C.F.R. §200.334-337. Longer retention periods may apply to real property and equipment disposition, audits, and litigation. Additionally, State, local, Tribal, or Territorial government laws may require longer retention periods.

The requirement to inform FEMA of all purchased equipment with a fair market value over \$5,000 after it is no longer needed for federally funded programs or projects in accordance with 2 C.F.R. § 200.313. FEMA reduces eligible funding by this amount.

The requirement to inform FEMA if the aggregate fair market value of unused supplies purchased for FEMA projects is over \$5,000 after they are no longer needed for federally funded programs or projects in accordance with 2 C.F.R. § 200.314. FEMA reduces eligible funding by this amount.

All activities on private property must have completed all necessary legal processes and obtained rights-of-entry and agreements to indemnify and hold harmless the Federal Government.

As required by Title VI of the Civil Rights Act of 1964, Sections 308 and 309 of the Stafford Act, and applicable provisions of laws and authorities prohibiting discrimination, all work claimed was [will be] delivered in an impartial and equitable manner.

As required by 44 C.F.R. § 206.228 and 2 C.F.R. Part 200.404, the costs claimed were of a type generally recognized as ordinary and necessary for the type of facility and work.

As required by Stafford Act § 312, I certify that I am not claiming any work or costs that are covered by another source such as revenue, non-federal grants, cash donations, another Federal agency, or another FEMA Program (e.g., Individual Assistance programs or Hazard Mitigation Grant Program. If I receive funding for any work or costs in this project application, I will notify the Recipient and FEMA, and funding will be reconciled to eliminate duplication.

All information provided regarding the project application is true and correct to the best of my knowledge. Upon submittal this project application becomes a legal document. The Recipient or FEMA may use external sources to verify the accuracy of the information entered. It is a violation of Federal law to intentionally make false statements or hide information when applying for Public Assistance. The False Claims Act (31 U.S.C. §§3729-3733) prohibits the submission of false or fraudulent claims for payment to the federal government. Suspicion of fraudulent activities should be reported to the FEMA Disaster Fraud Hotline, the Department of Homeland Security's Office of the Inspector General, or the Department

OMB Control Number FF-104-FY-22-243

Expires Month Date Year

of Justice Fraud Hotline. I understand that, if I intentionally make false statements or conceal any information in an attempt to obtain Public Assistance, it is a violation of Federal laws, which carry severe criminal and civil penalties including a fine of up to \$250,000, imprisonment, or both. (18 U.S.C. §§ 287,

1001, 1040, and 3571).				
Applicant Signature				
Applicant Authorized Representative [system generated]	Title	Signature	Date submitted [system automated]	
	Section IX - Recipie	nt Recommendation		
Does all work in this proje	ect meet the criteria to be		e funding?	
☐ No. Please describe wi				
Recipient Authorized Representative [system generated]	Title	Signature	Date submitted [system automated]	
	Section X - Large Pro	ject Closeout Request		
Has the Applicant completed all the work associated with the project? ☐ No ☐ Yes. Proceed to the General Cost and Work Status Information section to provide the final costs and upload supporting documentation.				
	IM/DD/YYYY) Please updat	e if changed. [system gene	erated]	
Total approved amount [system generated] Federal share obligated [system generated] Date obligated [system generated]				
Section XI - Applicant Closeout Acknowledgments and Certifications				
I acknowledge and certify that I have reviewed and understand the following information regarding overarching requirements to receive Public Assistance. Please initial next to each statement. Projects were completed in accordance with 44 C.F.R. § 206.205 and the FEMA approved scopes of work, all necessary documents have been received, and any appeal for project overruns have been reconciled. The Stafford Act Section 705 imposes a 3-year limit on FEMA's authority to recover payments				
made to SLTT government Recipients and Applicants unless there is evidence of fraud. Section 705 does not apply to Private Non-profit organizations. I have read and understand FEMA issued Recovery Policy (FP 205-081-2), Stafford Act Section 705, Disaster Grant Closeout Procedures, which describes the limitations and requirements in detail.				
Applicant Authorized	Title	Signature	Date submitted [system	
Representative [system generated]	[system generated]	[system generated]	automated]	
Section	XII - Recipient Closeo	ut Certifications and Sig	gnature	

I certify that I have reviewed and understand the following information regarding overarching requirements to receive Public Assistance. Please initial next to each statement.

I certify that all costs were incurred in the performance of eligible work, that the projects were completed in accordance with the FEMA approved scopes of work, and that the project is in compliance with the provisions of the FEMA-State/Tribe/Territory Agreement, in accordance with 44 C.F.R. § 206.205.

generated]

I certify that the Recipient paid its applicable contribution to the non-Federal share, in cordance with the FEMA-State/Tribe/Territory Agreement.

accordance with the FEMA-State/Tribe/Territory Agreement.				
Recipient Authorized	Title	Signature	Date submitted [system	
Representative [system	[system generated]	[system generated]	automated]	

