

**ANNEX D: Part 1**

**STATE OF NEVADA**  
**PROJECT APPLICATION FOR HAZARD MITIGATION GRANT**  
**PROJECT TITLE: \_\_\_\_\_ DATE: \_\_\_\_\_**

Application is hereby submitted for a Hazard Mitigation Grant under the provisions of the Presidential Declaration, FEMA-1281-DR-NV dated July 20, 1999. The following information is furnished in support of this application. (Use continuation sheets if necessary.)

1. Name and Address of Applicant (Subgrantee):

\_\_\_\_\_  
\_\_\_\_\_

- Type: \_\_\_ County  
      \_\_\_ City  
      \_\_\_ State  
      \_\_\_ Private Non-Profit entities (requires an IRS ruling letter  
          granting tax exemption under sections 501(c), (d), or (e) of  
          the IRS code, or certification from the Secretary of State)  
      \_\_\_ Indian Tribe  
      \_\_\_ Other

Federal Information Processing Standard (FIPS) Number \_\_\_\_\_

Employer Identification Number (EIN) \_\_\_\_\_

Applicants U.S. Legislative District \_\_\_\_\_

Is the project in a different U.S. Legislative District (if so, which)

\_\_\_\_\_

Applicants NV Legislative District \_\_\_\_\_

Is the project in a different NV Legislative District (if so, which)

\_\_\_\_\_

2. Point of contact (Applicant's Agent) for the proposed measure or project:

a. Name: \_\_\_\_\_

b. Title: \_\_\_\_\_

c. Address: \_\_\_\_\_

d. Work Telephone Number: \_\_\_\_\_

FAX \_\_\_\_\_

3. Alternate contact:

- a. Name: \_\_\_\_\_
- b. Title: \_\_\_\_\_
- c. Address: \_\_\_\_\_  
\_\_\_\_\_
- d. Work Telephone Number: \_\_\_\_\_  
FAX \_\_\_\_\_

4. Location of proposed mitigation measure or project (include a map or drawing of the area showing location by road or street within the appropriate city, county, etc.)

\_\_\_\_\_  
\_\_\_\_\_

5. Description of the proposed mitigation measure or project:

- a. Describe any previous damage which has been caused by a disaster (Include any damage from the current disaster and any repetitive damage):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- b. Describe the work that will be necessary to prevent damage from occurring in the future or reducing substantially the damage that would occur if a similar event occurred again:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. The estimated cost for the proposed mitigation measure or project is: (ensure that detailed and complete documentation is submitted supporting each grant request.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Alternatives (3 required, which can include the proposed project and a no-action alternative):

\_\_\_\_\_

---

---

8. Explain how the cost of the project compares with the anticipated value of future damage reduction (the benefits must be greater than the cost):

---

---

---

---

Detailed Work Schedule (Should correspond with cost categories):

---

---

---

---

---

---

9. All projects must be in compliance with National Environmental Policy Act and state environmental regulations. Complete the Environmental Consideration form. Will this project have a significant impact on the environment? Yes\_\_ No\_\_.

If yes, has an environmental impact assessment been made?  
Yes\_\_ No \_\_

If yes, include a copy with this application. Explain as necessary.

---

---

---

10. Does the project comply with all federal requirements for the Hazard Mitigation Grant Program as outlined in the program guidance provided?

---

11. How many people (families and individuals) will benefit from the project?  
Families:\_\_\_\_\_Individuals:\_\_\_\_\_

12. This program requires a 75/25 cost sharing; 75% federal and 25% nonfederal. Has funding been committed to support the non-federal share? Yes\_\_ No\_\_.

Describe the non-federal funding source:

13. Does the community participate in the National Flood Insurance Program?  
Yes\_\_No\_\_
14. Does the applicant (Subgrantee) agree to provide the necessary maintenance required after completion of the project? Yes\_\_No\_\_
15. Does this proposal address a recurrent or repetitive problem rather than a one time event and are benefits permanent or long-term rather than temporary or short-term:  
\_\_\_\_\_  
\_\_\_\_\_
16. Is this project being funded in any part by other Federal Funding sources (for example: other disaster programs such as Public Assistance, Army Corps of Engineers, or the Natural Resources and Conservation Service)?

The undersigned does hereby submit this application for financial assistance under the State Hazard Mitigation Grant Program and does certify that the organization/community/county will fulfill all requirements of the program as contained in the program guidelines.

Organization Name & Address

Signature-Applicant's Agent \_\_\_\_\_

Signature-Chief Executive Officer \_\_\_\_\_

Date\_\_\_\_\_

**ANNEX D: Part 2**

**DESIGNATION OF APPLICANT AGENT**

---

NAME TITLE

---

Business Phone Home Phone

is hereby authorized to execute for and on behalf of \_\_\_\_\_ (Name of Subgrantee), a public entity established under the laws of the State of Nevada, this application and to file it with the Nevada Division of Emergency Management for the purpose of obtaining certain Federal financial assistance under the Robert T. Stafford Disaster Relief and Emergency Assistance Act (Public Law 100-707) or under the Federal Disaster Relief Act of 1974 (Public Law 93-288 as amended) or otherwise available from the President's Disaster Relief Fund.

That \_\_\_\_\_ (Name of Subgrantee), a public entity established under the laws of the State of Nevada, hereby authorizes its agent to provide to the State and to the Federal Emergency Management Agency for all matters pertaining to such Federal disaster assistance the assurances attached to the project application.

Approved By

Type name and title

Signature

Date

(Notary Seal)  
required

## **ANNEX D: Part 3**

### **Environmental Considerations Questionnaire**

Projects funded under the Hazard Mitigation Grant Program must comply with the National Environmental Policy Act and State of Nevada environmental requirements. To help meet these requirements, please complete this questionnaire as thoroughly as possible and attach to the Project Application. If a previous Environmental Impact Statement or Environmental Assessment is available, attach it to the application.

Information provided in this questionnaire should be as complete and thorough as possible to expedite approval. "Yes" or "no" answers should be avoided when possible. Instead, try to provide detailed explanations to as many answers as you can. Both beneficial and adverse impacts must be addressed.

#### **1. Purpose and Need**

Discuss why the proposed action is needed, describe the problem(s) or issue(s) that is/are being addressed and provide historical or other information that demonstrates the importance of solving the particular problem.

#### **2. Description of the Proposed Action:**

Provide a clear statement of the scope of the project (discussing the relationship between each project element), include estimated quantities and costs of needed materials, size of the area affected (if appropriate) and maps and/or diagrams.

#### **3. Alternatives and Associated Impacts: \_\_\_\_\_**

Provide as detailed a description as possible of each technically feasible alternative and the expected impacts. The "no action" alternative must be described.

#### **4. Affected Environments: \_\_\_\_\_**

Provide a brief description of the project area. Include an assessment of the following: the Physical environment (i.e., water resources -lakes/drainage ditches/streams; land minerals/geology); the Human environment (i.e., health/public safety resources; transportation resources; economic resources; land use; aesthetic resources; recreational resources; historical, cultural and archeological resources); the ecological environment (any rare or unique vegetation; any wildlife, including aquatic and

unique/endangered species, in or near site). Also identify any significant cultural or social issues. Provide as much background information on the existing conditions as necessary to assist in evaluating the potential impacts.

5. Environmental Consequences of Proposed Action: \_\_\_\_\_

Evaluate any short-term impacts (i.e., a temporary road closing) as well as long-term impacts (i.e., relocation of an essential service) that the proposed action may have.

<b>HISTORICAL REVIEW CHECKLIST</b>	
Historical review was designed to ensure that historic properties are considered during Federal project planning and execution. The National Historic Preservation Act of 1966 (NHPA) assures that Federal agencies take into account the effects of the project on historic properties. Historic Property means any prehistoric or historic district, site, building, structure, or object included in, or eligible for inclusion in, the National Register. This term includes, for the purposes of these regulations (36 CFR Part 800) artifacts, records and remains that are related to and located within such properties. The term eligible for inclusion in the National Register includes both properties formally determined as such by the Secretary of the Interior and all other properties that meet National Register listing criteria.	
	If a building is 50 years old, this indicates to FEMA that the building may be on or eligible for the National Register of Historic Places. Building construction dates must be verified.
	Will the proposed project have an adverse influence or change to characteristics of the historic property(s) in the project area?
	Is the proposed project going to adversely effect the historic district? Historic districts information can be found through local historic groups, societies, and/or the State Historic Preservation Office.
	Is the project breaking new ground or increasing the depth of excavation or beyond the original width?
	Is the project outside previously disturbed soil?
	Does the project area contain any prehistoric, historic, archaeological or cultural resources? Local cultural or archaeological resources can be researched by a licensed archaeologist in Archaeological Information Center (AIC). Additional information can also be found in local historic groups, societies, and/or the State Historic Preservation Office.
	For structures less than 50 years old, provide one color photograph from the front.
	For structure 50 years and older, provide four color photographs of the structure from all four corners and a view up the street and down the street showing the surrounding area.

Please include any AIC searches or other documents related to historical properties in the project area.



**GENERAL ENVIRONMENTAL REVIEW DOCUMENTATION**

NEPA is the established environmental policy for the nation. This policy insures that the environment is considered in all federal actions. NEPA requires that federal agencies consider the effects of their proposed actions and alternatives on the human environment before deciding to fund and implement the action. The law requires a decision making process and not a specific outcome. All federal actions are subject to NEPA review.

A clear written description of the entire scope of work, including any alternatives that may be under consideration, and any additional work, not funded by FEMA, that will be performed at substantially the same time. Include any studies, plans, drawings, sketches, or schematics, as may be available, to help understand the entire project.

Photos are required showing the proposed project area in the context of its surroundings. If the project is a building, show all sides of the entire building (at least from opposite corners), and the context of the building in its setting including the surrounding buildings. If the project is in a rural setting, show the project area in the foreground with the background of the surrounding area in all four directions.

Location maps (e.g., USGS maps, Thomas Bros. Maps or City Maps) as necessary to show the undertaking in the context of its surroundings. For projects in rural settings or for project with ground disturbing activities, USGS maps are mandatory.

Documentation of any other agency-s environmental determinations within the scope of the project and surrounding areas.

**NATIONAL HISTORIC PRESERVATION ACT**

Documentation of the date of construction for the original, existing facility (e.g., building permit records, tax records, newspaper accounts, architectural drawings, etc.)

Plans showing the limits of proposed excavations or other ground disturbing activities associated with the project.

Location maps, in addition to those mentioned above, showing the project within local, state or national historic districts.

Local, state or national landmark listings of historic properties within the project area, including the National Register of Historic Places

Any existing cultural resource surveys or reports describing the archaeological/historic properties (e.g., archaeological sites, historic buildings, historic landmarks, etc.) that exist within the project area or could be affected by the project.

Copies of all available plans for the existing facility as well as documentation of any changes made since the original construction.

**ENDANGERED SPECIES ACT**

Documentation (e.g., Biological Assessment, Initial Study, Environmental Impact Report) evaluating biological resources that might be affected by the project activities.

	Documentation of coordination with other agencies (e.g., USFWS, etc.) including reports, studies and recommendations.
	Species lists identifying endangered or threatened species that might be affected by the proposed project
<b>FISH AND WILDLIFE COORDINATION ACT</b>	
	Detailed plans and studies for the control or modification of a natural stream or body of water
	Documentation of coordination with other agencies (e.g., USFWS, etc) including reports, studies and recommendations
	Detailed maps, reports and studies documenting the scope of the project and surrounding areas including construction of dams, levees, impoundments, stream locations, and water-diversion structures
	Detailed descriptions and related reports and studies of proposed discharges of pollutants including industrial, mining, and municipal wastes or dredged and fill material into a body of water or wetlands.
	Recommendations of the USFWS and affected state(s) for protecting fish and wildlife
<b>WILD AND SCENIC RIVERS ACT</b>	
	Detailed plans and studies for the construction of any water resource project (e.g., dam, water conduit, reservoir, powerhouse, transmission line, discharge to water or development project)
	Documentation of coordination with other agencies (e.g., BLM, USFWS, etc) including reports, studies and recommendations.
	Detailed maps, reports and studies documenting the scope of the project and surrounding areas including scenic, recreational, geological, fish and wildlife, historic, cultural or similar areas.
<b>EXECUTIVE ORDER 11988 B FLOODPLAIN MANAGEMENT</b>	
	Detailed maps (e.g., FIRM, FBFM, State designated floodway maps, etc.) defining floodplain/floodway boundaries within the project area.
	Reports and studies (e.g., hydrology, hydraulics, etc.) documenting the scope of the project and surrounding areas as they relate to the occupancy or modification of floodplains including direct and indirect effects.
	Documentation of compliance/consistency with federal, state, local and county floodplain management programs and plans.
	Documentation of coordination with other agencies, including reports, studies and recommendations
	Documentation of any public notices or public meetings
<b>EXECUTIVE ORDER 11990 B PROTECTION OF THE WETLANDS</b>	
	Detailed maps (e.g., USACE, USFWS, etc.) defining wetland boundaries with the project areas.
	Reports and studies (e.g., wetland assessment, hydrology, hydraulics, etc.) documenting the scope of the project and surrounding areas as they relate to the

	occupancy or modification of wetlands including direct and indirect effects.
	Documentation of compliance/consistency with federal, state, local and county floodplain management programs and plans.
	Documentation of coordination with other agencies, including reports, studies and recommendations
	Documentation of any public notices or public meetings
<b>EXECUTIVE ORDER 12898 B ENVIRONMENTAL JUSTICE FOR LOW INCOME AND MINORITY POPULATIONS</b>	
	Documentation of coordination with other agencies (e.g., US Census Bureau, Local and Community Planning and Development Agencies, etc.) including reports, studies and recommendations.
	Reports and studies (e.g., traffic, noise, odor, etc.) documenting the scope of the project and surrounding areas as they relate to low income and minority populations including direct and indirect effects.
	Census data and income information on affected populations
<b>OTHER RELEVANT LAWS AND ENVIRONMENTAL REGULATIONS</b>	
	Seismic Safety Executive Order (if applicable)
	See examples above.

### **Land-use and Socio-economic Factors**

- A. Describe any inconsistencies with current land-use in the project area.
- B. Describe any conflicts with local zoning ordinances.
- C. Identify potential relocation of structures that may result from the project.
- D. Describe the effect the project will have on economic activities in the area.
- E. What effects will the project have on parks or recreation areas?
- F. How will the project effect "prime and unique" farmlands or farmlands with state or local significance?
- G. Is the project located in a FLOODPLAIN or floodway? If so, hydrologic analyses may be required.

### **Air and Water Quality**

- A. Describe any potential effects the project may have on air quality.

- B. Will the project require any dredging and/or disposal of any material (including construction) in any wetlands or waterways? If so, the project may require a U.S. Army Corps of Engineers Section 404 permit.
- C. Describe any modifications to streambeds or banks of waterways that may result from the project.
- D. Describe any effect the project may have on wild and scenic rivers, or rivers being studied for inclusion as wild and scenic rivers.

### **Natural Resources**

- A. Describe any removal of marine, aquatic or terrestrial vegetation.
- B. Describe any adverse impacts to wetlands or marshlands.
- C. List all known rare and endangered species within range of the project area.
- D. Is the project located inside or near a wildlife refuge or wildlife conservation area?

### **Archeological and Historical Resources**

Is the project site located in any area of archeological, cultural or historical significance?  
Contact the State Historic Preservation Officer for determination.

### **Coordination**

State and federal agencies, such as those listed below, may have information pertinent to the potential environmental impacts of the project. Contact these and other agencies to coordinate development of the project and preparation of the environmental analysis.

Coordination may consist of phone conversation logs, letters, or meeting minutes.  
Those items should be included in the submittal package.

Agencies requiring coordination:  
Nevada State Planning Coordinators Office  
State Historic Preservation Officer (SHPO)  
Nevada Division of Environmental Protection  
U.S. Natural Resources Conservation Service  
The Nevada Department of Wildlife  
Local Floodplain Administrators

U.S. Fish and Wildlife Service  
U.S. Department of Interior  
U.S. Environmental Protection Agency  
U.S. Army Corps of Engineers  
Nevada Department of Transportation  
U.S. Geological Survey  
Nevada Bureau of Mines and Geology  
Other appropriate Departments or Agencies

The information provided in the above questionnaire will be analyzed by the FEMA Regional Director to determine if there will be significant environmental impacts as a result of the proposed project. If not, then a Finding of No Significant Impact (FONSI) will be prepared, attached to the Environmental Analysis, now an Environmental Assessment (EA), and forwarded to FEMA Headquarters Mitigation Division for approval. If significant impacts are anticipated, then either the project will be reviewed and revised or an Environmental Impact Statement (EIS) will be prepared.

---

Project Hazard Mitigation Coordinator Signature

Date

**Annex D Part 4 - BENEFIT COST ANALYSIS B FLOOD SUPPLEMENT**

**FEMA requires a benefit cost analysis of all projects. Benefits must be equal to or greater than the project costs for a project to be eligible for funding. The benefits considered are the reduction in project future damages and losses due to the mitigation project.**

**If exact information is not available, it is acceptable to use approximate date, reasonable estimates or informed judgments. However, all estimates must be clearly identified and be justified by a written explanation. Since benefit cost uses mathematical calculations, all prior damage estimates, probable future losses, duration, etc., must be quantified.**

**1. Please provide a 7.5 minute Quad Map and general area map with the location of the project on the map. Are the maps attached? Yes No**

**2. Were public facilities or structures damaged during the declared disaster? Yes No**

**3. Describe the damages(s), the repair, and the cost of the repair.**

**4. Were the damages addressed in a Public Assistance Project Worksheet (PW)? Yes No**

**5. Has the PW(s) been approved for funding? Yes No**

**6. Attach copies of PW(s).**

**7. If there is no PW for the repair of a damaged facility or structure, please explain why there was no PW written.**

**8. Were any non-profit organizations or institutions that perform essential governmental services in the project area displaced during the flood event? Yes No**

**9. What service does the non-profit provide?**

**10. Did the non-profit or service provider temporarily relocate? Yes No**

**11. Did another organization or government entity provide substitute services? Yes No**

**12. What is the usual cost to provide the service? Please separate cost into line items (moving cost, rent, computer rentals, staff members, etc.)**



### BENEFIT COST WORKSHEET AA1@

The benefits of the project are determined by the damage that will be avoided in the future. The damage is calculated from the depth and frequency of the flood events. Therefore, it is important to provide detailed information relating to the depth of flooding experienced by homes and other occupied structures. This worksheet is for the accounting of damages that occurred to homes and other occupied structures that are within the area that would benefit from the proposed project. Please group the structures according to similar types, sizes and usage. You may also group structures by common first floor elevation or by common depth of flooding.

<u>First floor elevation</u>	<u>FIRM Special Flood Hazard Zone</u>	<u>Number of Structures</u>	<u>Average Square Feet (include basement)</u>	<u>Total Square Footage of the Group</u>	<u>Number of Stories (do not include basement)</u>	<u>Average Basement Square Footage</u>	<u>Flood Depth in 19__ and Recurrence Interval</u>	<u>Flood Depth in 19__ and Recurrence Interval</u>

Please provide any additional information on the usage of structures included in the table A1 by answering the following questions.

1. If businesses are listed in the table above, briefly describe the type of business and provide the approximate number of employees.
  
2. Are there any structures such as schools, hospitals, clinics that are used to provide government services listed in the table above? Please describe.

### BENEFIT COST WORKSHEET AA2@

If your project area has types of damages other than to homes or other occupied buildings, please list the loss in the table below. List actual or potential damages in one row and project an anticipated loss above or below the flood event that damaged occurred. (for example, if loss occurred at a 5 year recurrent interval, estimate the possible losses of a 10 year recurrence level.) Do not combine losses. List each type of loss.

<u>Year of Loss</u>	<u>Flood Recurrence Interval in years (5 year, 10 year, 20 year, 100 year)</u>	<u>What was damaged? Roadway, loss of rip/rap, concrete headwall, etc.</u>	<u>List the dollar amount of actual damages that occurred, and damaged that could</u>	<u>Estimated damages after mitigation is completed (similar event and projected</u>



			<u>occur in a future event (pavement, roadbase, debris, fencing, pipes, rip/rap, etc)</u>	<u>event)</u>

**Please add any additional comments to clarify or add any relevant data to the table above.**

**SINGLE FAMILY HOME ELEVATION / RELOCATION / ACQUISITION PROEJCTS**

**BENEFIT COST WORKSHEET AB@**

1. The benefits of the project are determined by the damage that will be avoided in the future. The damage is calculated from the depth and frequency of the flood events. Therefore, it is important to provide detailed information relating to the depth of flooding experienced by homes and other occupied structures. Is the plat map or other drawing attached? Yes \_\_\_\_\_ No \_\_\_\_\_
2. Is the flood problem repetitive? Yes \_\_\_\_\_ No \_\_\_\_\_
3. How many times did the sites flood, and what were the years of the flood events?
4. Were there damages to homes or other structures? Yes \_\_\_\_\_ No \_\_\_\_\_  
How many? \_\_\_\_\_
5. How many homes or structures do you plan to elevate? Homes \_\_\_\_\_ Other \_\_\_\_\_
6. How many homes or structures do you plan to acquire? Homes \_\_\_\_\_ Other \_\_\_\_\_
7. Were any of the potential elevation or acquisition site occupants displaced during the flood event? Yes \_\_\_\_\_ No \_\_\_\_\_
8. Who was displaced and how many homes, non-profits or other service providers were displaced? Homes \_\_\_\_\_ Apartment Complex \_\_\_\_\_ Number of apartment units \_\_\_\_\_ Non-Profits \_\_\_\_\_ Other service providers \_\_\_\_\_
9. How long were they displaced? Hours \_\_\_\_\_ Days \_\_\_\_\_ Weeks \_\_\_\_\_ Months \_\_\_\_\_
10. How long will homeowners or other potential elevation candidates become displaced during the elevation process? Days \_\_\_\_\_ Weeks \_\_\_\_\_ Months \_\_\_\_\_
11. What is the average cost of rent in this area per month? Homes \_\_\_\_\_ Business \_\_\_\_\_ (sq.ft)

You must complete the individual site-by-site worksheet for each home or structure to be elevated or acquired. Make as many copies as needed of the worksheet.

A color photo is required for each home or structure to be elevated / relocated / acquired.

<b>Elevation / Acquisition / Relocation Property Site Inventory Information</b>	
<u>Project Number</u>	
<u>Project Title</u>	
<u>Present Owner</u>	
<u>Address</u>	
<u>City, Town or Community</u>	
<u>State or Jurisdiction</u>	
<u>County Name</u>	
<u>Zip Code + Extension</u>	
<u>Square Footage</u>	
<u>Number of Stories</u>	
<u>Basement</u>	<u>Yes</u> <u>No</u>
<u>Year Built</u>	
<u>SHPO Clearance</u>	<u>Yes</u> <u>No</u>
<u>Type of Construction</u>	
<u>Type of Foundation</u>	<u>Wood</u> <u>Slab</u> <u>Wood/Slab</u> <u>Other</u>
<u>First Floor Elevation</u>	
<u>FIRM Special Flood Hazard Zone</u>	
<u>NFIP Policy Number</u>	
<u>Percent Damaged</u>	<u>0-49%</u> <u>50-99%</u> <u>100%</u> <u>NA</u>
<u>Flood Damage</u>	<u>Date</u> <u>Recurrence Level</u> <u>Depth of Flooding</u>
<u>Purpose of Residence</u>	<u>Primary Residence</u> <u>Rental</u> <u>Other</u>
<u>Latitude</u>	
<u>Longitude</u>	
<u>Parcel Number</u>	
<u>Legal Description</u>	
<u>Pre-Event Fair Market Value</u>	
<u>Title Holder</u> <u>B</u> <u>Post Mitigation</u>	
<u>Property Action B</u> <u>Pull Down Menu</u>	<u>Acquisition/Demolition</u> <u>Elevation</u> <u>Relocation</u> <u>Acquisition/Vacant Land</u> <u>Floodproofed</u> <u>Seismic Retrofit</u> <u>Wind Retrofit</u> <u>Other Retrofit</u> <u>Unknown</u> <u>Y.</u>
<u>URA - Tenant Name</u>	

**ATTACH A COLOR PHOTO OF EACH SITE TO BE ELEVATED / RELOCATED / ACQUIRED.**

**Annex D Part 5 - BENEFIT COST ANALYSIS B FIRE SUPPLEMENT**

FEMA requires a benefit cost analysis of all projects. Benefits must be equal to or greater than the project costs for a project to be eligible for funding. The benefits considered are the reduction in project future damages and losses due to the mitigation project.

If exact information is not available, it is acceptable to use approximate date, reasonable estimates or informed judgments. However, all estimates must be clearly identified and be justified by a written explanation. Since benefit cost uses mathematical calculations, all prior damage estimates, probable future losses, duration, etc., must be quantified.

**SITE SPECIFIC INFORMATION FOR VEGETATION MANAGEMENT B**  
**FUEL BREAKS**

10 Is this a fuel modification project? Yes \_\_\_\_ No \_\_\_\_

20 What methods will be used to modify the fuels? Prescribed Fire \_\_\_\_ Grazing \_\_\_\_  
Mechanical Clearing \_\_\_\_ Manual Clearing \_\_\_\_

30 How many structures will be protected by the fuel break?

40 What is the replacement value of the structures that this fuel break will protect?

50 Does the proposed fuel break provide infrastructure protection (i.e. bridges, roads, etc.)? Yes \_\_\_\_ No \_\_\_\_ If yes, what is the replacement value of the infrastructure protected?

60 What is the cost per acre for the proposed fuel break?

70 Annually, how many fires occur in the area protected by the proposed fuel break?

80 Annually, how many fires in the area protected by the proposed fuel break exceed 100 acres?

90 Annually, how many fires in the area protected by the proposed fuel break exceed 500 acres?

**SITE SPECIFIC INFORMATION FOR VEGETATION MANAGEMENT B**  
**DEFENSIBLE SPACE**

10 Is this a defensible space project? Yes \_\_\_\_ No \_\_\_\_

20 What methods will be used to provide defensible space? Enforcement of defensible space standards \_\_\_\_ Installation of fire resistive landscaping around existing structures \_\_\_\_

30 How many structures will be protected by improving their defensible space?

40 What is the average replacement value of the structure which will be protected by improving their defensible space?

50 Annually how many fires occur in the area protected by the improved defensible space?

60 Annually how many fires occur in the area protected by the improved defensible space exceed 100 acres?

70 Annually how many fires occur in the area protected by the improved defensible space exceed 500 acres?

**Annex D Part 6 - BENEFIT COST ANALYSIS B SEISMIC SUPPLEMENT**

**FEMA requires a benefit cost analysis of all projects. Benefits must be equal to or greater than the project costs for a project to be eligible for funding. The benefits considered are the reduction in project future damages and losses due to the mitigation project.**

**If exact information is not available, it is acceptable to use approximate date, reasonable estimates or informed judgments. However, all estimates must be clearly identified and be justified by a written explanation. Since benefit cost uses mathematical calculations, all prior damage estimates, probable future losses, duration, etc., must be quantified.**

**STRUCTURAL RETROFIT**

**Building Location:**

**Name of building/facility:**

**Address:**

**City:**

**Zip:**

**Provide a street map (8 2" by 11") with building identified.**

**General Information:**

**Number of stories above grade:**

**Total flood area in square feet:**

**Date of construction:**

**Does the building have historical significance?**

**What is the building's function?**

**Building and Site Description:**

**An engineer's description of the building or facility (structure) is required along with an analysis of the seismic hazard involved. The description should cover construction types, framing, foundations, etc. Explain any seismic design, complications such as soft story, irregular shape heavy masonry, chimney, etc. This description is to include expected seismic performance information, fragility**

**curves of buildings and contents, seismic hazard analysis, casualty rates and other related information as available.**

**Provide an engineer=s description of the existing structure and descriptions of the soil type and geotechnical reports.**

**Building Type B Check the appropriate category(ies):**

	1	Wood Light Frame
	2	Wood (Commercial or Industrial)
	3	Steel Moment Frame
	4	Steel Braced Frame
	5	Steel Light Frame
	6	Steel Frame with Concrete Shear Walls
	7	Steel Frame with Unreinforced Masonry Fill
	8	Concrete Moment Frame
	9	Concrete Frame with Concrete Shear Walls
	10	Concrete Frame with Unreinforced Masonry Infill
	11	Precast Concrete Tilt-up
	12	Precast Concrete Frame with Concrete Shear Walls
	13	Precast Concrete Frame without Shear Walls
	14	Unreinforced Masonry Bearing Wall
	15	Reinforced Masonry with Precast Concrete Diaphragm
	16	Reinforced Masonry with Flexible Diaphragm
	17	Mobile Home
	18	Other-User DefinedYprovide explanation.

**Demolition Threshold:**

Many buildings or facilities (structures) may be considered to be demolished rather than be repaired when the cost to repair the damage exceeds the replacement cost. Demolition threshold is the percentage of a structure damage., in which case the structure would be replaced rather than be repaired. Demolition threshold may be considered 20% to 30% for old, marginal or substandard structures, 50% 50 60% for modern structures and 100% for historical structures.

What is the demolition threshold?

**Replacement Value:**

The replacement value is the cost to provide a functionally equivalent building or facility (structure) of the same size. For historical buildings, provide reproduction value; this value is a more appropriate measurement for a historical structure replacement value.



What is the structure replacement value (total cost or cost per square foot)?

**Contents Value:**

The value of the structure contents is the estimated total value of its contents, including furniture, flooring, equipment, computers, supplies, artwork, etc. For most structures the contents value is significantly smaller than the value of the structure.

Please provide a description and a value of the contents (total value or per square foot).

**Displacement Costs Due to Earthquake Damage:**

Displacement costs due to earthquake damage may occur when occupants must operate from a temporary site while earthquake damage to the original structure is repaired. Major earthquakes may cause extensive damage to many structures, thus reducing any available alternate space leading to higher rental costs through the damaged area. Other displacement costs include moving and extra operating costs incurred because of the disruption and displacement from the original and normal quarters.

Please provide other costs of displacement (per month).

**Building Occupancy:**

Provide the average number of persons (employees and visitors) present in the building during the day, evening and night for weekdays and weekends, the hours per day, months per year.

	Weekdays			Weekends		
	Day	Evening	Night	Day	Evening	Night
Occupants						
Days per Week						
Hours per Day						
Months per Year						

**Value of Public/Nonprofit Services:**

This section applies to public/nonprofit facilities only. If the building under evaluation is commercial or residential then bypass this section. The annual budget is the total annual operating cost of all public/nonprofit agency functions located in the building. This total includes rental costs, but exclude Apass through money@, such as Social Security payments that the agency receives and redistributes.

Describe the services provided.

What is the annual budget of the public/nonprofit agency?

Is the rent included in the annual budget?

If the rent is not included, what is a reasonable estimated rent (per month)?

### **Post-Disaster Continuity Premium:**

Some public/nonprofit services may have little demand after a disaster, while other may be vital to be maintained. Public/nonprofit services that are important for post-disaster response and recovery are worth more to the community after the disaster than in normal circumstances. The post-disaster continuity premium assigns an extra value to these post-disaster services. For example, emergency services would be vital in the hours and days immediately following a disaster, whereas routine services, such as employment referral, would not. Based on the nature of the services, the post-disaster continuity premium is how much extra daily costs the tenant or agencies would be willing to spend to maintain the normal functions. Routine services that can be delayed with little or no impact should not have a continuity premium.

Please provide the post-disaster continuity premium (per day) if applicable.

### **Functional Downtime:**

Functional downtime is the estimated number of days a public/nonprofit agency cannot provide due to disaster related caused damage. For example, an agency may estimate to relocate out of its building for 60 days, but may resume service from temporary quarters after seven days. The functional downtime is considered seven (7) days.

The typical functional downtime estimate assumes that for every 1% of building damage sustained, one day of functional downtime occurs. It is assumed that public/nonprofit agencies and businesses will resume function at a temporary site within 30 days. Thus, the typical functional downtime is capped at 30 days.

Functional downtime is also used to estimate income losses (if applicable) due to earthquake damage.

If the estimated functional downtime is different from the typical, please describe in detail.

### **Rent and Business Income Loss:**

Where there is rental income from residential and commercial space, please provide the total monthly rent from all tenants.

Please provide the estimated net income of commercial business per month.

### **Project Mitigation Costs:**

Project mitigation costs should include all direct construction costs plus other costs such as architectural and engineering fees, testing, building permits and project management, but relocation costs should be excluded. Unavoidable costs such as required code upgrades are to be individually listed.

Please provide the project mitigation costs:

The year in which the project cost was estimated:

### **Project Life of Mitigation:**

The project's useful life is the estimated number of years during which the project mitigation will maintain its effectiveness. A useful life of 5 to 10 years for an equipment purchase is commonplace. Useful lives of 30 years for residential buildings and 50 years for non-residential buildings are typical. For major infrastructure projects, or for historically important buildings, useful lives of 50 to 100 years may be appropriate.

Please provide the project in mitigation useful life (in years).

### **Relocation Costs:**

For some mitigation projects, occupants may have to be relocated for construction of the project. Relocation time is the number of months for which the building must be vacated in order for the mitigation project to be completed. Note this relocation time is completely distinct from the displacement time needed to repair earthquake related damages. Other relocation costs include moving and extra operating costs incurred because of the temporary relocation.

What is the project relocation time (in months)?

What are the estimated rental costs during occupant relocation (in square foot/per month)?

If there are other relocation costs (per month) please provide.

### **Displacement costs:**

Displacement time is the estimated number of days the occupants are vulnerable to displacement due to seismic damage. Displacement time may be shorter than the repair time because some earthquake damage repairs can be made with occupants in the building. If the estimated displacement time due to earthquake is unusual or out of the ordinary.

Please describe displacement costs in detail.

SEISMIC RETROFIT OF PENDANT LIGHTING AND  
SUSPENDED CEILING SYSTEMS

**Facility Information:**

Number of facility locations requiring retrofit

Provide name(s) and address(es) of facility

Provide a street map with location of facility

**Project Information:**

Provide total number of lights to be retrofitted per facility

Provide unit cost per light per facility to retrofit

Provide total cost per facility to retrofit lights

Provide total cost to retrofit all lights if different from the preceding answer.

Provide the total square feet of ceiling to retrofit per facility

Provide unit cost per square foot to retrofit ceiling per facility

Provide total cost per facility to retrofit ceiling.

Provide total cost to retrofit all ceilings if different from the preceding answer.

SEISMIC BRACING OF EMERGENCY POWER OR COMMUNICATIONS SYSTEMS

**Facility Information:**

Provide number of locations requiring bracing.

Provide name(s) and address(es) of facility(ies).

Provide a street map with the location of the facility(ies).

**Project Information:**

Please provide a list of equipment to be braced per facility.

Include the size or capacity of the equipment and the replacement cost.

Describe the critical function of the equipment and the consequences if there was a loss of function due to a seismic event. If a cost for the loss of function can be determined, please provide.

What is the cost of bracing the equipment per each piece of equipment requiring bracing?

What is the total cost of all bracing at each facility?

What is the total cost of all bracing at all facilities?

**ANNEX D: Part 7**

**Nevada Division of Emergency Management  
2525 S. CARSON ST.  
CARSON CITY, NV 89710**

**STATE-LOCAL DISASTER ASSISTANCE AGREEMENT  
HAZARD MITIGATION GRANT PROGRAM**

This agreement between the State of Nevada and \_\_\_\_\_ (the applicant) shall be effective on the date signed by the state and the applicant. It shall apply to all assistance funds provided by or through the state to the applicant as a result of a Presidential Declared Disaster occurring within the State of Nevada.

The applicant's designated representative certifies that:

1. He/she has legal authority to apply for assistance on behalf of the applicant.
2. The applicant will provide all necessary financial and managerial resources to meet the terms and conditions of receiving federal and state disaster.
3. The applicant will use disaster assistance funds solely for the purposes for which these funds are provided and as approved by the Governor's Authorized Representative (GAR).
4. The applicant agrees to provide the necessary local share of funding for completion of the project.
5. The applicant will appoint by resolution an Applicant's Local Agent to act on the jurisdiction's behalf and will establish and maintain a proper accounting system to record expenditures of disaster assistance funds in accordance with generally accepted accounting standards or as directed by the Governor's Authorized Representative.
6. The local cost share funding will be available within the specified time.
7. The applicant will give state and federal agencies designated by the Governor's Authorized Representative, any advance funds which are not supported by audit or other federal or state review of documentation maintained by the applicant.
8. The applicant will return to the state, within 15 days of such request by the Governor's Authorized Representative, any advance funds that are not supported

by audit or other federal or state review of documentation maintained by the applicant.

9. The applicant will comply with all applicable codes and standards as pertains to this project and agrees to provide maintenance as appropriate.
10. The applicant will comply with all applicable provisions of federal and state law and regulation in regard to procurement of goods and services.
11. The applicant will begin project work within 90 days of approval of the grant and complete all items of work within one year unless an exception is granted to extend the time frame.
12. The applicant will comply with all federal and state statutes and regulations relating to nondiscrimination.
13. The applicant will comply with provisions of the Hatch Act limiting the political activities of public employees.
14. The applicant will comply with the National Flood Insurance Program (NFIP) purchase requirements.
15. The applicant will not enter into cost-plus-percentage-of cost contracts for completion of Hazard Mitigation Grant Projects.
16. The applicant will not enter into contracts for which payment is contingent upon receipt of state or federal funds.
17. The applicant will not enter into any contract with any party who is debarred or suspended from participating in federal assistance programs.

Signed for the Applicant

Typed Name \_\_\_\_\_

Title \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Signed for the State:

Typed Name \_\_\_\_\_

Governor's Authorized Representative \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_





**ANNEX D: Part 8**

**HAZARD MITIGATION 404 GRANT  
CERTIFICATION REGARDING LOBBYING AND DISCLOSURE  
OF LOBBYING ACTIVITIES  
STATE OF NEVADA**

**Disaster Contract FEMA DR-NV**

The undersigned certifies, to the best of his/her knowledge and belief, that:

1. 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 awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, grant, loan or cooperative agreement.
2. If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee or any agency, a Member of congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.
3. The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$ 10,000 and not more than \$100,000 for each such failure.

Name and Title (typed)

Authorized Signature

Date

