|  |
| --- |
| **Assistance Requesting:** **Primary** **Community Lifeline Utilized:**  FMA (Flood Mitigation Assistance)  BRIC (Building Resilient and Infrastructure Communities)  Safety and Security  Energy (power grid, fuel)  HMGP (Hazard Mitigation Grant Program)  Food, Water, Shelter  Communications  **** Health and Medical Transportation  If HMGP: FEMA-DR-#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Hazardous Material (HAZMAT)      **Community Information: Community NFIP/CRS Status:**    Conforms to State Mitigation Plan NFIP Participating  In Good Standing   Conforms to Local Mitigation Plan  Non-Participating  CRS Community   State or Local Government  Private Non-Profit CRS Community Score: \_\_\_\_\_\_\_ Project Pre-Identified in Local Plan   Declared County (HMGP only)    **Building Codes: Safe Room Project Type:**     Adopted the building codes consistent with the international codes?  Tornado/Hurricane Tornado  Year of Building Code: \_\_\_\_\_\_\_\_\_\_\_\_  Hurricane  Building Code Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   Building codes been assessed on the Building  Code Effectiveness Grading Schedule?  BCEGS Score: \_\_\_\_\_\_\_\_\_    **For state use only:**  Date Pre-Application Received \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    State Reviewer\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_ |

This worksheet is for all Hazard Mitigation Assistance grant programs “Safe Room” proposals that meet the FEMA construction criteria in FEMA P-320 Fourth Edition “Taking Shelter from the Storm” and FEMA P-361 Third Edition “ Safe Rooms for Tornadoes and Hurricanes”. Please complete ALL sections and provide the documents requested. If you require technical assistance with this worksheet, please contact the Hazard Mitigation Division at (404)-635-7522, [gema-hazmitpoc@gema.ga.gov](mailto:gema-hazmitpoc@gema.ga.gov) or 1-800-TRY-GEMA to have a Risk Reduction Specialist assigned to you. If you are applying for more than one Safe Room, complete pages 2-4 for each Safe Room.

1. Applicant Information
   * 1. Name of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Applicant Type

State Government Local Government Private Non-Profit

3. Worksheet Prepared by:

Ms. Mr. Mrs. First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Last Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Telephone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address (City, State, Zip): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**4. Authorized Applicant Agent (**An individual authorized to sign financial and legal documents on behalf on the local government (e.g., the Chairperson, Board of County Commissioners, or the County Manager, etc.).

Ms. Mr. Mrs. First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Last Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Telephone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address (City, State, Zip): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Submitted: \_\_\_\_\_\_\_\_\_**

1. Project Information/Mitigation Plan
2. Project Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Project Summary: (Describe in detail what you are proposing to do.)
4. **Date of Hazard Mitigation Plan approval by FEMA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

This project must be identified in your Hazard Mitigation Plan. Provide a copy of the goal, objective, and action step that supports your project application. Please attach a letter of endorsement for the project from your County’s Emergency Management Agency (EMA) Director

Complete a worksheet for each Safe Room if submitting more than one. If submitting more than one safe room for funding consideration, rank each Safe Room in order of most important to least important with 1 being the Safe Room that is the highest priority. Rank \_\_\_\_\_\_\_\_\_\_\_

**C. Property Information:**

1. Property Owner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Physical Address (including city, and zip code): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Include color photographs showing a front view, a side view, a back view, and a street view with the building of each structure to be retrofitted

1. Digital Latitude: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Digital Longitude: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\*Digital Latitude and Digital Longitude coordinates need to be in Decimal Degrees.**

1. Tax Parcel Identification Number (include tax card): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Year Built\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Flood Zone Designation (include FIRM map): check all zones applicable for the property

🞎 VE 🞎 A (no base flood elevation given) 🞎 C or X (unshaded)

🞎 AE 🞎 B or X (shaded)

🞎 CBRA Zone 🞎 Other (describe) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **FIRM Panel Number** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FIRM Panel Number and Map can be generated at this address- <http://map.georgiadfirm.com/>. Follow the steps below after accessing the website.

*-Locate by* ***Coordinate Search***

*-Zoom to Point*

*- (Click on Red Dot) Flood Risk Snapshot*

*-Click Aerial View (Found on top right of viewer)*

*- Click Generate Report and Save As*

*-Once saved, open Adobe Acrobat Pro*

*-In Adobe select the Comment tab then add annotation with name of building, latitude and longitude*

*-Save and export into Pre-Application.*

1. **Scope of Work**
2. **Project Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
3. **Mitigation Activity** (Describe in detail what you are planning to do)

* *Describe the existing structure and project activities to be performed*

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

1. **Community Safe Room Project Type:**

🞎 New Safe Room or 🞎 Retrofit

🞎 Stand Alone Safe Room or 🞎 Internal Safe Room

1. **Project Useful Life: \_\_\_\_\_\_\_\_\_\_\_\_\_**

The estimated amount of time in years the structure will be operational. Standard value is 30 years. Acceptable limits 30-50 years (Documentation required if not 30 years)

1. **Safe Room Design Information:**

Safe Room Maximum Occupancy: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(5 square feet per Safe Room occupant for tornado safe rooms and 20 square feet per Safe Room occupant for hurricane safe rooms – See FEMA P-361 Third Edition Figure B5-1 and paragraphs below)

Gross Area (Square Footage) of the Safe Room: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Usable area (Square Footage) of the Safe Room: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What wind speed is the Safe Room designed to withstand? \_\_\_\_\_\_\_\_\_\_\_

(This will either be 235MPH or 250 MPH depending on the Safe Room type - See FEMA P-361 Third Edition Figure B3-1)

Anticipated Annual Maintenance Costs: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Safe Room Structure Type(s):**

What is the population at risk that will utilize the Safe Room? \_\_\_\_\_\_\_\_\_\_\_\_\_\_

FEMA guidance stipulates the radius (in miles) of the community that will use this safe room for tornadoes is ½ mile. Whether walking or driving, prospective safe room occupants must be able to safely reach the Safe Room within 5 minutes. (See FEMA P-361 A4.3.1)

**\*Note: Hurricane safe rooms are designed and built to provide life-safety protection for first responders and critical and essential personnel and faculty occupants. \***

What are the Predominant Structure Types (PST) that people will leave to go to the Safe Room? Indicate up to two types.

* Institutional Building, e.g. hospital, dormitory
* Manufactured Housing (includes mobile homes)
* One- or Two-Family Residences
* Open Areas (parkland, fairgrounds, etc.)
* Pre-engineered Metal Building, e.g. auditorium
* School (K-12)
* Small Professional Building (unreinforced masonry)

🞎 One- or Two-Family Residences

PST 1 = \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PST 2 = \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Occupancy and Response Information**

Enter the percent of the total occupancy coming from each Predominant Structure Type (PST) (from Section G.2.). Occupancy percentage total must equal 100% for at least one time.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Time** | **PST 1 (%)** | **PST 2 (%)** | **Totals (%)** |
| Day | 6:00 AM – 6:00 PM |  |  |  |
| Evening | 6:00 PM – Midnight |  |  |  |
| Night | Midnight – 6:00 AM |  |  |  |

This table is the percent of response of occupants from each type of structure. The BCA software is populated with default values for the selected structure types. You may overwrite these values but must provide justification to do so.

|  |  |  |  |
| --- | --- | --- | --- |
| **Period** | **Time** | **User Entered PST 1 (%)** | **User Entered PST 2 (%)** |
| Day | 6:00 AM – 6:00 PM |  |  |
| Evening | 6:00 PM – Midnight |  |  |
| Night | Midnight – 6:00 AM |  |  |

**I. Cost Estimation Information**

List all estimated costs that are directly related to the construction of the Safe Room. Consider the potential future date of construction when compiling the cost estimate. Eligible cost categories include the following:

* + - Engineering and design
    - Site preparation including building foundation materials and construction
    - Structural systems capable of resisting design wind loads
    - Protective building envelops components such as walls, roof systems, and doors
    - Functional components such as:
      * Permanent electrical lighting, ventilation, heating/cooling, toilets and handwashing facilities.
      * Signage, emergency communications equipment, back-up power generation for the safe area; and
    - Operations and Maintenance Plan development (please refer to the section II for information on development).

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Item Description** | **Quantity** | **Unit Price** | **Amount** | **Source** |
|  |  |  |  |  |
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Total Cost: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**II. Operations and Maintenance Plan (O &M)**

The O&M plan should identify how the safe room will be operated and maintained in a way that achieves the objective of providing life-safety protection from a tornado or hurricane given the expected warning time and duration for the event. If the safe room is for tornadoes as well as hurricane protection, the O & M plan should cover both events. (FEMA P-361 Part A)

**\*Note: The community will need to provide a letter to GEMA stating that they will provide a FEMA-approved Operations and Maintenance Plan prior to the closeout of the project. Please Refer to Section III. For an example O & M Plan Letter. \***

1. The operations and maintenance plan includes the following components:
   1. Safe Room Design
      1. Size, configuration, access points, support areas
      2. Multi-use versus single-use-Steps to ensure that the safe room is ready for each use
   2. Duration of the safe room occupancy
   3. Intended occupants-Open to the public or for only specific occupants?
   4. Staffing and Personnel Considerations
      1. Roles and responsibilities
      2. Contact lists
      3. Staff Training
      4. Work shifts
   5. Community outreach and Notification
   6. Signage
   7. Expectation of use during off-hours
   8. Information on access of functional needs
   9. Alerts and drills
   10. Pets
   11. Emergency Provisions
       1. Food and water
       2. Communications
       3. Emergency Supplies
   12. Access and Entry
       1. Parking
       2. Entering the Safe Room
       3. Registering occupants
       4. Locking down the Safe Room
   13. Operations During an Event
       1. Security
       2. First aid and Health Services
       3. Communication
   14. Post-Event Operations
   15. Maintenance

**III. Sample Operations and Maintenance Plan Letter of Intent**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_COUNTY EMERGENCY MANAGEMENT AGENCY

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_State: \_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_

Phone: Fax:

\_\_\_\_\_\_\_\_\_\_\_\_\_ County Operations and Maintenance Descriptive Statement:

This Operations and Maintenance Plan is being developed for one structure that has been designed and constructed to function as a combination “Community Safe room” as defined by FEMA 361, third edition.

A community safe room is defined as a building, structure, or portion thereof that has been designed and constructed to provide life-safety protection of its occupants in compliance with the design and construction criteria for community safe rooms as defined by FEMA 361.

The focus of the operations and maintenance plan is to provide procedures for opening, managing, and closing a community safe room in response to a tornado and hurricane.

\_\_\_\_\_\_\_\_\_\_\_\_ County community safe room is intended for the use of Tornadoes and this safe room may only function for a matter of hours.

\_\_\_\_\_\_\_\_\_\_\_\_ County Emergency Operations Center safe room is intended for use during hurricanes and this safe room may function for 24 hours or longer, depending on the severity of the event.

\_\_\_\_\_\_\_\_\_\_\_\_ County will develop a plan that describes the difference between a Tornado watch and a tornado warning, and clearly define the actions to be taken for this weather-related emergency.

\_\_\_\_\_\_\_\_\_\_\_ County will develop a plan that describes the difference between a Hurricane watch and a hurricane warning, and clearly define the actions to be taken for this weather-related emergency.

The plan will also address the community safe room Management Team and the various duties they will perform.

The plan will include:

* The names of all contact personnel
* Definitions of a Tornado watch and Tornado Warning
* Definition of Tornado Warning and Hurricane Warning
* Sending of warning signal to community through Tornado Sirens
* Taking a head county once inside the community safe room
* Securing the community safe room
* Notifying and maintaining contact with the EOC
* Monitoring the storm from within the safe room
* Addressing when conditions warrant allowing community safe room occupants to leave
* After storm is over, cleaning the community safe room