



**State of Texas Hazard Mitigation Grant Program (HMGP)  
Individual Safe Room Rebate Program Application Package**

**Help Protect Your  
Community with HMGP  
Individual Safe Room Rebate Program**

**The completed application and one exact copy should be mailed to:**

State Hazard Mitigation Officer  
Division of Emergency Management  
Texas Department of Public Safety  
P.O. Box 4087  
Austin, TX 78773-0226

Phone: (512) 424-2429  
Fax: (512) 424-5959  
Street Address:  
1033 La Posada Dr., Suite 310  
Austin, TX 78752

## INDIVIDUAL SAFE ROOM REBATE PROGRAM HMGP GRANT APPLICATION CHECKLIST

SUB-APPLICANT:	DISASTER NUMBER:
COUNTY:	MAP APPROVAL DATE:
EMERGENCY PREPAREDNESS APPROVAL LEVEL:	

PROJECT DESCRIPTION: \_\_\_\_\_ would like to sponsor an Individual Safe Room Rebate Program to facilitate the installation of \_\_\_\_\_ individual safe rooms in homes located within the designated area.

DOCUMENT	COMPLETE	COMMENTS
1. Texas State application	<input type="checkbox"/>	A Texas application must be included in your application.
2. State of Texas Assurances	<input type="checkbox"/>	Complete this form and ensure compliance.
3. Is this project identified in your Mitigation Action Plan?	<input type="checkbox"/>	<b>Label As: Attachment A.</b> If this project was identified in the FEMA approved local Mitigation Action Plan, insert the page and section where the action is located.
4. SF 424 - Federal Application	<input type="checkbox"/>	This is a standard form for those requesting federal funding.
a. Federal Assurances FEMA 20-16	<input type="checkbox"/>	Summary sheet for assurances
b. 20-16 B & 20-16 C	<input type="checkbox"/>	Construction assurances and lobbying certification
5. Project Officer Designation Form	<input type="checkbox"/>	Use this to designate primary and secondary contacts - these are the individuals the State will contact regarding this project. If these individuals change during the course of the project this form needs to be resubmitted.
6. Third Party Officer Designation Form	<input type="checkbox"/>	Contractors /Individuals/Companies (if applicable) that we may work with on the application or the implementation of the project.
7. Floodplain Manager Form	<input type="checkbox"/>	Complete this form with the information of the floodplain manager designated for the Sub-Applicant in which the project is located.
8. Floodplain Manager's Assessment/Consultation	<input type="checkbox"/>	<b>Label As: Attachment B.</b> Safe rooms may not be in a floodplain even if the home is elevated above the BFE (Base Flood Elevation). A floodplain manager's confirmation will be required for each home.
9. 25% Or More Match Certification	<input type="checkbox"/>	<b>Label As: Attachment C.</b> This is on agency or Sub-Applicant letterhead certifying the ability to meet the 25% <b>OR MORE</b> cost share of the project.
10. Scope of Work	<input type="checkbox"/>	Describe the rebate program implementation and participant selection criteria, describe the tornado risk in the designated area, population information, and any environmental and/or floodplain issues.
11. Project Cost Breakdown	<input type="checkbox"/>	Plug in the number of safe rooms into the formula.
12. Project Timeline	<input type="checkbox"/>	Quarterly timeline with at <u>least</u> 2 activities per quarter <u>not</u> including submittal of quarterly report as an activity. Make sure this coincides with the cost breakdown and SOW.
13. Environmental Justice Statement	<input type="checkbox"/>	<b>Label As: Attachment D.</b> Put on Sub-Applicant's signed letterhead. As a means to comply with EO 12898 requirements, all HMGP applications must include an Environmental Justice Statement signed by the authorized agent or chief elected/executive official that answers the following: <ol style="list-style-type: none"> <li>1. Are there concentrations of low income or minority populations in or near the HMGP project?</li> <li>2. Will the HMGP project result in a disproportionately high and adverse effect on low income or minority populations?</li> <li>3. What action(s) will be taken to insure achievement of environmental justice for low income and minority populations?</li> </ol>
14. SHPO letters	<input type="checkbox"/>	<b>Label As: Attachment E.</b> SHPO Letters will need to be obtained for all homes <u>over 45</u> years old.
15. Compliance Statement	<input type="checkbox"/>	<b>Label As: Attachment F.</b> A statement on sub-applicant letterhead that this project will be implemented in compliance with the Texas Individual Safe Room Rebate Program Handbook.
16. BCA Data and Supporting Documentation	<b>State</b>	The State will put this Benefit Cost Analysis together.

## MITIGATION GRANT PROJECT APPLICATION

### TEXAS HAZARD MITIGATION GRANT PROGRAM

Mail Application to: State Hazard Mitigation Officer  
 Division of Emergency Management  
 Texas Department of Public Safety  
 P. O. Box 4087  
 Austin, Texas 78773-0226

Phone: (512) 424-2429  
 FAX: (512) 424-5959

<b>SUB-APPLICANT COUNTY:</b>	<b>DUNS CODE:</b>														
<b>NAME OF SUB-APPLICANT: (CITY, AGENCY, ETC.)</b>	<b>FIPS CODE:</b>														
	<b>POINT - OF - CONTACT</b>														
<b>SUB-APPLICANT ADDRESS: (STREET, CITY, ZIP)</b>	<b>PHONE:</b>														
	<b>MOBILE:</b>														
<b>PROJECT LOCATION ADDRESS:</b>	<b>FAX:</b>														
	<b>E-MAIL:</b>														
<b>ESTIMATED TOTAL PROJECT COST: \$</b>	<b>SAMPLE:</b> <table style="width: 100%; border: none;"> <tr> <td style="width: 60%;">NUMBER OF SAFE ROOMS</td> <td style="text-align: right;">50</td> </tr> <tr> <td>COST PER SAFE ROOM</td> <td style="text-align: right;">\$6,000</td> </tr> <tr> <td>ADMINISTRATIVE FEE PER SAFE ROOM</td> <td style="text-align: right;">\$100</td> </tr> <tr> <td colspan="2">TOTAL = \$305,000</td> </tr> <tr> <td colspan="2">FEDERAL SHARE = \$155,000 (\$6,000 x 50) ÷ 2 + \$100 x 50</td> </tr> <tr> <td colspan="2">LOCAL SHARE = \$150,000 (\$6,000 ÷ 2)</td> </tr> </table>	NUMBER OF SAFE ROOMS	50	COST PER SAFE ROOM	\$6,000	ADMINISTRATIVE FEE PER SAFE ROOM	\$100	TOTAL = \$305,000		FEDERAL SHARE = \$155,000 (\$6,000 x 50) ÷ 2 + \$100 x 50		LOCAL SHARE = \$150,000 (\$6,000 ÷ 2)			
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<b>FEMA FUNDING (75%): \$</b>															
<b>LOCAL MATCH (25%): \$</b>															
<b>SOURCE OF LOCAL FUNDING:</b>															


**DESCRIPTION OF PROJECT / SCOPE OF WORK:** WOULD LIKE TO SPONSOR AN INDIVIDUAL SAFE ROOM REBATE PROGRAM TO FACILITATE THE INSTALLATION OF INDIVIDUAL SAFE ROOMS IN HOMES LOCATED WITHIN THE DESIGNATED AREA.

<b>Signature:</b>	<b>20. Title:</b>	<b>21. Date:</b>
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#### THIS SECTION FOR STATE USE ONLY

RECOMMENDED <input type="checkbox"/>	<b>DISASTER DECLARATION NUMBER:</b>
NOT RECOMMENDED <input type="checkbox"/>	<b>PROJECT CODE:</b>
INELIGIBLE <input type="checkbox"/>	<b>DATE RECEIVED:</b>
<b>STATE HAZARD MITIGATION OFFICER'S SIGNATURE:</b>	<b>TX APPLICATION #:</b>
	<b>FEMA APPLICATION #:</b>
	<b>LAT/LONG:</b>
	<b>COMMENTS:</b>
<b>DATE:</b>	

# APPLICATION FOR FEDERAL ASSISTANCE

<b>1. TYPE OF SUBMISSION:</b> Application <input type="checkbox"/> Construction <input type="checkbox"/> Non-construction		<b>2. DATE SUBMITTED</b>		Applicant Identifier	
		<b>3. DATE RECEIVED BY STATE</b>		State Application Identifier	
		<b>4. DATE RECEIVED BY FEDERAL AGENCY</b>		Federal Identifier	
<b>5. APPLICANT INFORMATION</b>					
Legal Name:			<b>Organizational Unit:</b> Department		
Organizational DUNS			Division		
<b>Address:</b> Street			<b>Name and telephone number of person to be contacted on matters involving this application (give area code)</b> Prefix                      First Name		
City			Middle Name		
County			Last Name		
State		Zip Code	Suffix		
Country			Email		
<b>6. EMPLOYER IDENTIFICATION NUMBER (EIN):</b> 			Phone Number (give area code)		FAX Number (give area code)
<b>8. TYPE OF APPLICATION:</b> <input type="checkbox"/> New <input type="checkbox"/> Continuation <input type="checkbox"/> Revision If Revision, enter appropriate letter(s) in box(es) (See back of form for description of letters.) <input type="checkbox"/> <input type="checkbox"/> Other (specify)			<b>7. TYPE OF APPLICANT:</b> (See back of form for Application Types)  Other (specify)		
<b>10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER:</b> <b>97-039</b>  TITLE (Name of Program) <b>Hazard Mitigation Grant Program</b>			<b>9. NAME OF FEDERAL AGENCY</b>		
<b>12 AREAS AFFECTED BY PROJECT (Cities Countries States etc )</b>			<b>11. DESCRIPTIVE TITLE OF APPLICANTS PROJECT:</b>		
<b>13. PROPOSED PROJECT</b> Start Date      Ending Date <b>Upon Approval      24 Months after Approval</b>			<b>14. CONGRESSIONAL DISTRICTS OF:</b> a. Applicant                      b. Project		
<b>15. ESTIMATED FUNDING</b>			<b>16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?</b> (for info: <a href="http://www.fws.gov/policy/lbrary/rgeo1237.pdf">http://www.fws.gov/policy/lbrary/rgeo1237.pdf</a> ) a. YES. <input type="checkbox"/> THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON  DATE:  b. NO. <input type="checkbox"/> PROGRAM IS NOT COVERED BY E.O. 12372  <input checked="" type="checkbox"/> OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW		
a. Federal	\$	.00	<b>17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT?</b>  <input type="checkbox"/> Yes If "Yes," attach an explanation. <input type="checkbox"/> No		
b. Applicant	\$	.00			
c. State	\$	.00			
d. Local	\$	.00			
e. Other	\$	.00			
f. Program Income	\$	.00			
g. TOTAL	\$	.00			
<b>18. TO THE BEST OF MY KNOWLEDGE AND BELIEF ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT. THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES.</b>					
<b>a. Authorized Representative</b>					
Prefix		First Name		Middle Name	
Last Name				Suffix	
b. Title				c. Telephone Number (give area code)	
Email:				Fax Number (give area code)	
d. Signature of Authorized Representative				e. Date Signed	

## INSTRUCTIONS FOR THE SF-424

Public reporting burden for this collection of information is estimated to average 45 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0043), Washington, DC 20503

PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

This is a standard form used by applicants as a required face sheet for pre-applications and applications submitted for Federal assistance. It will be used by Federal agencies to obtain applicant certification that States which have established a review and comment procedure in response to Executive Order 12372 and have selected the program to be included in their process, have been given an opportunity to review the applicant's submission.

Item:	Entry:	Item:	Entry:																
1.	Select Type of Submission.	11.	Enter a brief descriptive title of the project. If more than one program is involved, you should append an explanation on a separate sheet. If appropriate (e.g., construction or real property projects), attach a map showing project location. For pre-applications, use a separate sheet to provide a summary description of this project.																
2.	Date application submitted to Federal agency (or State if applicable) and applicant's control number (if applicable).	12.	List only the largest political entities affected (e.g., State, counties, cities).																
3.	State use only (if applicable)	13.	Enter the proposed start date and end date of the project.																
4.	Enter Date Received by Federal Agency Federal identifier number: If this application is a continuation or revision to an existing award, enter the present Federal Identifier number. If for a new project, leave blank.	14.	List the applicant's Congressional District and any District(s) affected by the program or project.																
5.	Enter legal name of applicant, name of primary organizational unit (including division, if applicable), which will undertake the assistance activity, enter the organization's DUNS number (received from Dun and Bradstreet), enter the complete address of the applicant (including country), and name, telephone number, e-mail and fax of the person to contact on matters related to this application.	15.	Amount requested or to be contributed during the first funding/budget period by each contributor. Value of in kind contributions should be included on appropriate lines as applicable. If the action will result in a dollar change to an existing award, indicate only the amount of the change. For decreases, enclose the amounts in parentheses. If both basic and supplemental amounts are included, show breakdown on an attached sheet. For multiple program funding, use totals and show breakdown using same categories as item 15.																
6.	Enter Employer Identification Number (EIN) as assigned by the Internal Revenue Service.	16.	Applicants should contact the State Single Point of contact (SPOC) for Federal Executive Order 12372 to determine whether the application is subject to the State intergovernmental review process.																
7.	Select the appropriate letter in the space provided. <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">A. State</td> <td style="width: 25%;">I. State Controlled Institution of Higher Learning</td> </tr> <tr> <td>B. County</td> <td>J. Private Industry</td> </tr> <tr> <td>C. Municipal</td> <td>K. Indian Tribe</td> </tr> <tr> <td>D. Township</td> <td>L. Individual</td> </tr> <tr> <td>E. Interstate</td> <td>M. Profit Organization</td> </tr> <tr> <td>F. Intermunicipal</td> <td>N. Other (Specify)</td> </tr> <tr> <td>G. Special District</td> <td>O. Not for Profit Organization</td> </tr> <tr> <td>H. Independent School District</td> <td></td> </tr> </table>	A. State	I. State Controlled Institution of Higher Learning	B. County	J. Private Industry	C. Municipal	K. Indian Tribe	D. Township	L. Individual	E. Interstate	M. Profit Organization	F. Intermunicipal	N. Other (Specify)	G. Special District	O. Not for Profit Organization	H. Independent School District		17.	This question applies to the applicant organization, not the person who signs as the authorized representative. Categories of debt include delinquent audit disallowances, loans, and taxes
A. State	I. State Controlled Institution of Higher Learning																		
B. County	J. Private Industry																		
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G. Special District	O. Not for Profit Organization																		
H. Independent School District																			
8.	Select the type from the following list: "New" means a new assistance award. "Continuation" means an extension for an additional funding/budget period for a project with a projected completion date. "Revision" means any change in the Federal Government's financial obligation or contingent liability from an existing obligation. If a revision, enter the appropriate letter: <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">A. Increase Award</td> <td style="width: 25%;">B. Decrease Award</td> </tr> <tr> <td>C. Increase Duration</td> <td>D. Decrease Duration</td> </tr> </table>	A. Increase Award	B. Decrease Award	C. Increase Duration	D. Decrease Duration	18.	To be signed by the authorized representative of the applicant. A copy of the governing body's authorization for you to sign this application as official representative must be on file in the applicant's office. (Certain Federal agencies may require that this authorization be submitted as part of the application.)												
A. Increase Award	B. Decrease Award																		
C. Increase Duration	D. Decrease Duration																		
9.	Name of Federal agency from which assistance is being requested with this application.																		
10.	Use the Catalog of Federal Domestic Assistance number and title of the program under which assistance is requested.																		

**U.S. Department of Homeland Security  
SUMMARY SHEET FOR ASSURANCES AND CERTIFICATIONS**

*O.M.B. No. 3067-0206  
Expires February 28, 2007*

FOR  
FY

CA FOR *(Name of Applicant)*

This summary sheet includes Assurances and Certifications that must be read, signed, and submitted as a part of the Application for Federal Assistance.

An applicant must check each item that they are certifying to:

- Part I  FEMA Form 20-16A, Assurances-Nonconstruction Programs
- Part II  FEMA Form 20-16B, Assurances-Construction Programs
- Part III  FEMA Form 20-16C, Certifications Regarding Lobbying; Debarment, Suspension, and Other Responsibility Matters; and Drug-Free Workplace Requirements
- Part IV  SF LLL, Disclosure of Lobbying Activities (If applicable)

As the duly authorized representative of the applicant, I hereby certify that the applicant will comply with the identified attached assurances and certifications.

\_\_\_\_\_  
Typed Name of Authorized Representative

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature of Authorized Representative

\_\_\_\_\_  
Date Signed

**NOTE: By signing the certification regarding debarment, suspension, and other responsibility matters for primary covered transaction, the applicant agrees that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by FEMA entering into this transaction.**

**The applicant further agrees by submitting this application that it will include the clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion-Lower Tier Covered Transaction," provided by the FEMA Regional Office entering into this covered transaction, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions. (Refer to 44 CFR Part 17.)**

**Paperwork Burden Disclosure Notice**

"Public reporting burden for this form is estimated to average 1.7 hours per response. Burden means the time, effort and financial resources expended by persons to generate, maintain, retain, disclose, or to provide information to us. You may send comments regarding the burden estimate or any aspect of the form, including suggestions for reducing the burden to: Information Collections Management, Federal Emergency Management Agency, 500 C Street, SW, Washington, DC 20472, Paperwork Reduction Project (3067-0206). You are not required to respond to this collection of information unless a valid OMB control number appears in the upper right corner of this form. Please do not send your completed form to the above address.

U.S. DEPARTMENT OF HOMELAND SECURITY  
ASSURANCES-CONSTRUCTION PROGRAMS

**NOTE:** Certain of these assurances may not be applicable to your project or program. If you have any questions, please contact the awarding agency. Further, certain Federal assistance awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

1. Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the assistance; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will not dispose of, modify the use of, or change the terms of the real property title, or other interest in the site and facilities without permission and instructions from the awarding agency. Will record the Federal interest in the title of real property in accordance with awarding agency directives and will include a covenant in the title of real property acquired in whole or in part with Federal assistance funds to assure nondiscrimination during the useful life of the project.
4. Will comply with the requirements of the assistance awarding agency with regard to the drafting, review and approval of construction plans and specifications.
5. Will provide and maintain competent and adequate engineering supervision at the construction site to ensure that the complete work conforms with the approved plans and specifications and will furnish progress reports and such other information as may be required by the assistance awarding agency or state.
6. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
7. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
8. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. Sections 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
9. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. Sections 4801 et seq.) which prohibits the use of lead based paint in construction or rehabilitation of residence structures.
10. Will comply with all Federal statutes relating to non-discrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. Sections 1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. Section 794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. Sections 6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to non-discrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to non-discrimination on the basis of alcohol abuse or alcoholism; (g) Sections 523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. 290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Acts of 1968 (42 U.S.C. Section 3601 et seq.), as amended, relating to non-discrimination in the sale, rental or financing of housing; (i) any other non-discrimination provision in the specific statute(s) under which application for Federal assistance is being made; and (j) the requirements of any other non-discrimination statute(s) which may apply to the application.
11. Will comply, or has already complied, with the requirements of Title II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or Federally assisted programs. These requirements apply to all interest in real property acquired for project purposes regardless of Federal participation in purchase.
12. Will comply with provisions of the Hatch Act (5 U.S.C. Sections 1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.

13. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. Sections 276a to 276a-7), the Copeland Act (40 U.S.C. Section 276c and 18 U.S.C. Section 874), the Contract Work Hours and Safety Standards Act (40 U.S.C. Sections 327-333) regarding labor standards for federally assisted construction subagreements.

14. Will comply with the flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.

15. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. Section 1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. Section 7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended, (P.L. 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended, (P.L. 93-205).

16. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. Section 1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.

17. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. 470), EO 11593 (identification and preservation of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. 469a-1 et seq.).

18. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984.

19. Will comply with all applicable requirements of all other Federal laws, Executive Orders, regulations and policies governing this program.

20. It will comply with the minimum wage and maximum hours provisions of the Federal Fair Labor Standards Act (29 U.S.C. 201), as they apply to employees of institutions of higher education, hospitals, and other non-profit organizations.

21. It will obtain approval by the appropriate Federal agency of the final working drawings and specifications before the project is advertised or placed on the market for bidding; that it will construct the project, or cause it to be constructed, to final completion in accordance with the application and approved plans and specifications; that it will submit to the appropriate Federal agency for prior approval changes that alter the cost of the project, use of space, or functional layout, that it will not enter into a construction contract(s) for the project or undertake other activities until the conditions of the construction grant program(s) have been met.

22. It will operate and maintain the facility in accordance with the minimum standards as may be required or prescribed by the applicable Federal, State, and local agencies for the maintenance and operation of such facilities.

23. It will require the facility to be designed to comply with the "American Standard Specifications for Making Buildings and Facilities Accessible to, and Usable by, the Physically Handicapped," Number A117. - 1961, as modified (41 CFR 101-17.703). The applicant will be responsible for conducting inspections to ensure compliance with these specifications by the contractor.

24. If any real property or structure thereon is provided or improved with the aid of Federal financial assistance extended to the applicant, this assurance shall obligate the applicant, or in the case of any transfer of such property, any transfer, for the period during which the real property or structure is used for a purpose for which the Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits.

25. In making subgrants with nonprofit institutions under this Comprehensive Cooperative Agreement, it agrees that such grants will be subject to OMB Circular A-122, "Cost Principles for Non-profit Organizations" included in Vol. 49, Federal Register, pages 18260 through 18277 (April 27, 1984).



U.S. DEPARTMENT OF HOMELAND SECURITY  
ASSURANCES-NON-CONSTRUCTION PROGRAMS

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As the duly authorized representative of the applicant, I certify that the applicant:

1. Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. Section 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration) 5 C.F.R. 900, Subpart F).
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. Sections 1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. Section 794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. Sections 6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) Sections 523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. 290-dd-3 and 290-ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Acts of 1968 (42 U.S.C. Section 3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
7. Will comply, or has already complied, with the requirements of Title II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or Federally assisted programs. These requirements apply to all interest in real property acquired for project purposes regardless of Federal participation in purchases.
8. Will comply with provisions of the Hatch Act (5 U.S.C. Sections 1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. Sections 276a to 276a-7), the Copeland Act (40 U.S.C. Section 276c and 18 U.S.C. Sections 874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. Sections 327-333), regarding labor standards for federally assisted construction subagreements.
10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.

11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. Section 1451 et seq.); (f) conformity of Federal actions to State (Clean Air) Implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. Section 7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended, (P.L. 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended, (P.L. 93-205).

12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. Section 1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.

13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. 470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. 469a-1 et seq.).

14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.

15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. 2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.

16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. Section 4801 et seq.) which prohibits the use of lead based paint in construction or rehabilitation of residence structures.

17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984.

18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program.

19. It will comply with the minimum wage and maximum hours provisions of the Federal Fair Labor Standards Act (29 U.S.C. 201), as they apply to employees of institutions of higher education, hospitals, and other non-profit organizations.

**U.S. DEPARTMENT OF HOMELAND SECURITY  
CERTIFICATIONS REGARDING LOBBYING; DEBARMENT, SUSPENSION AND  
OTHER RESPONSIBILITY MATTERS; AND DRUG-FREE WORKPLACE REQUIREMENTS**

**Applicants should refer to the regulations cited below to determine the certification to which they are required to attest. Applicants should also review the instructions for certification included in the regulations before completing this form. Signature on this form provides for compliance with certification requirements under 44 CFR Part 18, "New Restrictions on Lobbying; and 28 CFR Part 17, "Government-wide Debarment and suspension (Nonprocurement) and Government-wide Requirements for Drug-Free Workplace (Grants)." The certifications shall be treated as a material representation of fact upon which reliance will be placed when the Federal Emergency Management Agency (FEMA) determines to award the covered transaction, grant, or cooperative agreement.**

**1. LOBBYING**

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

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

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

(c) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subgrants, contracts under grants and cooperative agreements, and subcontract(s) and that all subrecipients shall certify and disclose accordingly.

Standard Form LLL, "Disclosure of Lobbying Activities" attached.  
(This form must be attached to certification if nonappropriated funds are to be used to influence activities.)

**2. DEBARMENT, SUSPENSION, AND OTHER  
RESPONSIBILITY MATTERS  
(DIRECT RECIPIENT)**

As required by Executive Order 12549, Debarment and Suspension, and implemented at 44 CFR Part 67, for prospective participants in primary covered transactions, as defined at 44 CFR Part 17, Section 17.510 A. The applicant certifies that it and its principals:

(a) Are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of Federal benefits by a State or Federal court, or voluntarily excluded from covered transactions by any Federal department or agency;

(b) Have not within a three year period preceding this application been convicted of or had a civilian judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or perform a public (Federal, State, or local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

(c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and

(d) Have not within a three year period preceding this application had one or more public t ransactions (Federal, State, or local) terminated for cause or default; and

B. Where the applicant is unable to certify to any of the statements in this certification, he or shall shall attached an explanation to this application.

**3. DRUG-FREE WORKPLACE  
(GRANTEES OTHER THAN INDIVIDUALS)**

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

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

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

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

- (1) The dangers of drug abuse in the workplace;
- (2) The grantee's policy of maintaining a drug free workplace;
- (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
- (4) the penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;

(c) Making it a requirement that each employee to be engaged in the performance of the grant to be given a copy of the statement required by paragraph (a);

(d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will:

(1) Abide by the terms of the statement; and

(2) Notify the employee in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction.

(e) Notifying the agency, in writing, within 10 calendar days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to the applicable FEMA awarding office, i.e., regional office or FEMA office.

(f) Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph (d)(2), with respect to any employee who is so convicted:

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency.

(g) Making a good faith effort to continue to maintain a drug free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).

8. the grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:

Place of Performance (Street address, City, County, State, Zip code)

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Check  if there are workplaces on file that are not identified here.

Section 17.630 of the regulations provide that a grantee that is a State may elect to make one certification in each Federal fiscal year. A copy of which should be included with each application for FEMA funding. States and State agencies may elect to use a Statewide certification.

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**PROJECT OFFICER DESIGNATION  
For  
HAZARD MITIGATION GRANT**

\_\_\_\_\_  
Date

**Sub/Contractor/Grantee:** \_\_\_\_\_  
Local Government or eligible Agency/Organization

Hazard Mitigation Grant Program (HMGP) Project Number: \_\_\_\_\_  
Pre-Disaster Mitigation Program (PDM) Project Number: \_\_\_\_\_  
Repetitive Flood Claim Grant Program (RFC) Project Number: \_\_\_\_\_

I designate my Project Officer for this grant as follows:

Primary Project Officer	Secondary Project Officer
Name	Name
Organization	Organization
Official Position	Official Position
Mailing Address	Mailing Address
City, State, Zip	City, State, Zip
Daytime Phone	Daytime Phone
Fax Number	Fax Number
Email ↘	Email ↘
<p>The above Primary and Secondary Project Officers are hereby authorized to execute and file application for this mitigation project on behalf of this organization for the purpose of obtaining certain state and federal financial assistance under the Robert T. Stafford Disaster Relief &amp; Emergency Assistance Act, (Public Law 93-288 as amended) or otherwise available. Designated Project Officers are authorized by the below Certifying Official to represent and act for this organization in all dealings with the State of Texas for all matters pertaining to this grant, and will serve as the single point of contact with the designated State Project Officer.</p>	

\_\_\_\_\_  
Signature of Mayor, Judge, or Executive Director

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of above Authorized Official

# Third Party Authorization

Date: \_\_\_\_\_

Sub-Applicant/ Grantee: \_\_\_\_\_

Hazard Mitigation Grant Program (HMGP) Project Number: \_\_\_\_\_

Pre-Disaster Mitigation Grant Program (PDM) Project Number: \_\_\_\_\_

Repetitive Flood Claim Grant Program (RFC) Project Number: \_\_\_\_\_

In order to be more efficient in assisting our sub-grantee's with their HMGP applications and projects, the State is asking for the contact information below to be filled out for any contacts in addition to the primary and secondary project officers, who will be authorized for involvement in the grant application or project identified above. This would include contractors/individuals/companies that are authorized to communicate with the State on the application or implementation of the project.

Name:
Organization:
Official Position:
Mailing Address:
City, State, Zip:
Daytime Phone:
Fax Number:
Email:

The above individual has been given permission to communicate with the Texas Division of Emergency Management, Mitigation section, by the sub-grantee concerning their Hazard Mitigation Grant Program applications and projects.

\_\_\_\_\_  
Signature of Authorized Agent/Project Officer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name & Title

**FLOODPLAIN MANAGER FORM  
For  
HAZARD MITIGATION GRANT**

\_\_\_\_\_  
**Date**

**Sub-Applicant/Grantee:** \_\_\_\_\_  
Local Government or eligible Agency/Organization

Hazard Mitigation Grant Program (HMGP) Project Number: \_\_\_\_\_  
Pre-Disaster Mitigation Program (PDM) Project Number: \_\_\_\_\_  
Repetitive Flood Plain Grant Program (RFC) Project Number: \_\_\_\_\_

The designated Floodplain Manager for this project application is as follows:

	Floodplain Manager
Name	
Organization	
Official Position	
Mailing Address	
City, State, Zip	
Daytime Phone	
Cell Number	
Fax Number	
Email	
	Certified Floodplain Manager (CFM) Information
CFM Certification Number	
If not a CFM – enter the date of attendance for:	
CFM - 1 Week Course	
Floodplain 101	
The designated Floodplain Manager is authorized by the below Certifying Official to represent and act for this organization in all dealings with the State of Texas matters pertaining to floodplain issues for this grant.	

\_\_\_\_\_  
Signature of Mayor, Judge, or Executive Director

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of above Authorized Official

## **PROPOSED TIMELINE SAMPLE**

The timeline included in the application should be simple. This is repetitive task type program that has start up and close out procedures. If local participation is high, this project can ultimately include cost overruns and period of performance extensions if grant funding is available. These activities would be addressed in the quarterly reports but not in the original application timeline.

**Task 1.** Upon project approval, the sub-grantee staff will finalize the local program implementation guidelines, participant qualification and selection process criteria, participant implementation instructions, participant performance timelines, etc. The final local program implementation plan and guidelines should be submitted to the TDEM project officer for review.

**Target Date:** TDEM review and approval of the program implementation guidelines should be completed during the first half of the first quarter following project award.

**Task 2.** The sub-grantee will publicize the program the program application procedure and effective dates in the eligible project area with a press release to newspapers, radio, television, and any other media sources available such as websites.

**Target Date:** Program representation with procedures and participant application packages should be rolled out in the second half of the first quarter.

**Task 3.** The Sub-grantee will receive participant applications, verify eligibility information and application completion assistance to willing participants and begin accepting completed applications.

**Target Date:** This task should be repeated for each quarter until the allocated safe rooms are committed or the project period of performance expires.

**Task 4.** The sub-grantee will receive participant applications, verify eligibility issues such as location inside a floodplain and structure age (SHPO consultation will be required on all homes over 45 years old). Once eligibility is verified and all required participant application documentation is completed the sub-grantee begins and continues to present award packages and complete instructions, to the qualified participants.

**Target Date:** This task should be repeated for each quarter until the allocated safe rooms are committed or the project period of performance expires.

**Task 5.** Once installations begin the sub-grantee staff will track program progress, inspect and document completed safe rooms, and process the rebates in compliance with the sub-grantee program implementation guidelines and the Texas Individual Safe Room Rebate Program Handbook.

**Target Date:** This task should be repeated for each quarter until the allocated safe rooms are committed or the project period of performance expires.

**Task 6.** As each installation is completed the sub-grantee staff will perform the final inspection and close out operations in accordance with the Texas Individual Safe Room Rebate Program Handbook provided in the project award package. Rebate requests with all required backup documentation should be submitted to TDEM for reimbursement on a monthly basis.

**Target Date:** This task should be repeated for each quarter until the allocation safe rooms are committed or the project period of performance expires.

**Task 7.** The application timeline, the final task is the closeout of all activities and submission of all final reports and documentation and scheduling the audit. The lat/long for the installed safe rooms should be provided to the local emergency and first responder groups.

**Target Date:** This task should be placed in the last half of the final quarter (8<sup>th</sup>) of the original project timeline.

Deviations from the application timeline must be addressed in your quarterly reports.



## Scope of Work

\_\_\_\_\_ would like to sponsor an Individual Safe room Rebate Program to facilitate the installation of \_\_\_\_\_ individual safe rooms in homes located within the designated area. We will ensure no HMGP funded shelters will be constructed within a designated flood zone. This will be verified as part of the application process. We will determine if any properties are historically significant and will follow proper guidance to ensure damages to any historical properties are minimized. Once a shelter is built, we will conduct a site visit and process all rebate payment requests to the residents.

## Project Cost Breakdown

Maximum Allowable Cost per Safe room	\$6000	50% of this amount is considered the Local Match
Administrative Fee per Safe room	\$100	Do not include in the Local Match
<b>Maximum</b> Reimbursement for each Safe room	\$3000	Given to Applicant to reimburse the homeowner.

**\*\*\* SAMPLE \*\*\* SAMPLE \*\*\* SAMPLE \*\*\***

Number of Safe rooms	50
Cost Per Safe room	\$6,000
Administrative Fee per shelter	\$100
<b>Total</b>	\$305,000
<b>Federal Share</b>	\$155,000 $(\$6000 \times 50) \div 2 + \$100 \times 50$
<b>Local Match</b>	\$150,000 $(\$6000 \times 50) \div 2$

***Enter your numbers here.***

Number of Safe rooms	
Cost Per Safe room	
Administrative Fee	
<b>Total</b>	
<b>Federal Share</b>	
<b>Local Match</b>	

## **Timeline**

<b>Quarter</b>	<b>Action Items</b>	<b>Description</b>
<b>1</b>	1.	
	2.	
<b>2</b>	1.	
	2.	
<b>3</b>	1.	
	2.	
<b>4</b>	1.	
	2.	
<b>5</b>	1.	
	2.	
<b>6</b>	1.	
	2.	
<b>7</b>	1.	
	2.	
<b>8</b>	1.	
	2.	