



Acquisition/Elevation Worksheet

For preliminary Benefit Cost Analysis conducted by the State Mitigation Technical Team

Applies for the following mitigation activities: **ACQUISITION, ELEVATION AND MITIGATION RECONSTRUCTION** projects. For assistance, contact the State of Florida Mitigation Technical Unit.

IMPORTANT: This worksheet is required as part of your application. The State of Florida Mitigation Technical Unit will conduct a Benefit Cost Analysis (BCA) for your project and the following information is needed to evaluate cost effectiveness. Once a preliminary BCA is completed, the reviewer will contact you with results and/or to collect support documentation.

NOTE: A complete worksheet will expedite the Technical Review.

Requirements

To complete a successful project application, a minimum amount of technical information is required for review. Data collected in this worksheet will provide reviewers with preliminary information necessary to evaluate project eligibility, feasibility, and cost effectiveness. Carefully review and confirm that you are aware of the following information.

All projects shall provide protection against a 100-year storm event. Activities shall be completed in strict compliance with Federal, State and Local applicable Rules and Regulations.

Acquisition: Mitigation activities shall include all associated debris be removed to clear the site, the land be converted to open space and deed restricted as set forth in the FEMA program requirements concerning the acquisition of property for open space [44 CFR 206.434 (e)].

Elevation: The habitable living areas of the original structure shall be elevated, and the non-habitable areas (if any) shall be converted to storage or parking. The project shall be designed and constructed in compliance with the Florida Building Code, ASCE 24-14 or latest edition, the Federal Flood Risk Management Standards (FFRMS), NFIP standards in 44 CFR, Part 60 and/or local floodplain ordinances or any other applicable local regulations.

Mitigation Reconstruction: Any enclosed space at grade level shall have hydrostatic vents and can only be used for storage or parking only. The square footage of the newly constructed and elevated structure shall be no more than ten (10) percent greater than the original square footage. The project shall be designed and constructed in compliance with the Florida Building Code, ASCE 24-14 or latest edition, the Federal Flood Risk Management Standards (FFRMS), NFIP standards in 44 CFR, Part 60 and/or local floodplain ordinances or any other applicable local regulations.

Note: The Federal Flood Risk Management Standards (FFRMS) do not apply to DR-4673, Hurricane Ian project applications.

I confirm that I have reviewed the requirements listed above (signature):

FEMA has approved an approach to demonstrating cost-effectiveness for certain Acquisition, Elevation and Mitigation Reconstruction projects based on pre-calculated benefits which requires minimal documentation if certain requirements are met.

BEFORE PROCEEDING TO THE NEXT SECTION PLEASE SELECT AN OPTION BELOW:

Does your project meet all the requirements from the below FEMA memorandum?

[Pre-Calculated Benefits for Projects in the Special Flood Hazard Area](#)

[Pre-Calculated Benefits for Severe Repetitive Loss and Repetitive Loss Acquisition Projects](#) (Acquisition projects only)

[Substantial Damages Waiver](#) (Acquisition projects only)

Yes (Only complete Section I of this worksheet)

No (Complete all sections of this worksheet)

For additional information and resources, please refer to FEMA Technical Review Job Aids for [Acquisition](#) and [Elevation](#) projects.



Section I – Project General Information

Project Name:	? Worksheet completed by: Name: Title: Phone: Email:
Sub-Applicant:	

Section II – Project Cost Information

? Mitigation Project Cost:	? Annual Maintenance Cost:
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Section III – Project Specific Information

Select the type of project you are proposing:

Acquisition
 Structure Elevation
 Mitigation Reconstruction

? Does the property have an Elevation Certificate?

Yes (Please attach to this Worksheet)
 No

The table below allows data entry for up to 8 locations. If your project has more than 8 locations, you can either submit a second Acquisition/Elevation Worksheet or attach a separate list, providing the information requested below and in Section IV, as applicable.

ID	? Project Location (address)	? Existing Foundation Type	? *Proposed Foundation Type	? *How many feet is lowest floor being raised?
1.	3344 Mangrove Drive Hernando Beach FL	Slab-on-grade	Open - Piling	11.9
2.	3362 Gulfview Drive, 34607 Hernando Beach FL	Slab-on-grade	Open - Piling	9.67
3.		- Select -	- Select -	
4.		- Select -	- Select -	
5.		- Select -	- Select -	
6.		- Select -	- Select -	
7.		- Select -	- Select -	
8.		- Select -	- Select -	

*Applicable only to Structure Elevation and Mitigation Reconstruction projects.



MITIGATION

Acquisition/Elevation Worksheet

Section V – Additional Information

Please use this page to expand on the information provided above or to include any additional information relevant to the proposed mitigation project.



ACQUISITION/ELEVATION WORKSHEET INSTRUCTIONS

Refer to the instructions below to complete the Acquisition/Elevation Worksheet using the best available data.

Section I – Project General Information

Project Name: Enter the name of the project title. The title should be short but descriptive (e.g., City of Orlando, Bonita Springs, Elevation).

Sub-Applicant: Enter your organization's legal name.

Worksheet completed by: Enter name, title, phone number, and email of the person completing this Worksheet. This person must have the knowledge and/or the resources to accurately answer all questions and provide supporting documentation, as needed. Information may come from multiple credible sources.

Section II – Project Cost Information

Mitigation Project Cost: Enter the total cost of the project. A lump sum on this worksheet is acceptable for preliminary BCA, but a detailed breakdown attached to your application is required. For more detailed information on eligible and ineligible costs, refer to the HMA Guidance.

Annual Maintenance Cost: Enter the cost associated with maintaining the effectiveness of the components installed as part of the elevation/mitigation reconstruction project. For acquisition projects you may leave this field blank.

Section III – Project Specific Information

Project Location: Provide a full description of the specific geographical location(s) of the project, including full address(es) with street name and number, city, state, and zip code. For more than 8 locations, please provide information on Section V of this worksheet.

Type of Mitigation:

Acquisition: The purchase of a structure and its associated land parcel. Acquisition may be combined with demolition or the relocation of the structure to an area not prone to flooding. In both cases, the acquired land is deed restricted in order to eliminate future damage.

Elevation: Raising a building to place the lowest floor at or above the designated Base Flood Elevation (BFE) according to designs that may include extended foundation walls, fill, piles, piers, or other techniques. The Federal Flood Risk Management Standard (FFRMS) requires the elevation of the lowest floor to be a minimum of 2 feet above BFE. Hence, the final design elevation shall be BFE + 2 feet or to the elevation specified in local ordinances, if higher.

Mitigation Reconstruction: Mitigation reconstruction is the construction of an improved, elevated structure on the same site where an existing structure and/or foundation has been partially or completely demolished or destroyed. These projects include either total or partial demolition of the structure and result in the construction of code-compliant and hazard-resistant structures on elevated foundation systems. The Federal Flood Risk Management Standard (FFRMS) requires the lowest floor of the structure to be constructed a minimum of 2 feet above BFE. Hence, the final design elevation shall be BFE + 2 feet or to the elevation specified in local ordinances, if higher.

Existing Foundation Type:

Slab: Also known as slab-on-grade, the lowest floor of the structure is formed by a concrete slab that sits directly on the ground. The slab may be supported by independent footings or integral grade beams.

Pier: An upright (vertical) support member of a building usually constructed of masonry or cast-in-place concrete, with a height limited to a maximum of three times the smallest lateral dimension. It is designed and constructed to function as an independent structural element in supporting and transmitting building and environmental loads to the ground.

Pile: An upright (vertical) support member of wood, steel or precast concrete, usually long and slender in shape, that is driven or jetted into the ground and supported primarily by friction between the piling and the surrounding earth.

Proposed Foundation Type: If proposing an elevation or mitigation reconstruction project, select the type of foundation to be constructed to properly address all loads and be appropriately connected to the floor structure above.

Elevation Certificate Available? If an elevation certificate is available, please include as an attachment to your application. An Elevation Certificate documents important features of your property, including its location, flood zone, building characteristics, and most importantly, the elevation of its lowest floor.

How many feet will the structure be elevated above the BFE: Enter this information only if you are proposing an elevation or mitigation reconstruction project. At a minimum, the structure must be elevated or constructed 2 feet above the BFE in compliance with the Federal Flood Risk Management Standard (FFRMS). Be mindful of any local ordinances, if higher.



MITIGATION

Acquisition/Elevation Worksheet

Section IV – Historical Damage Information

Storm Name: Enter the name given to the natural hazard event when damage occurred.

Date of Event: Enter the date of historical outage event.

Estimated Flood Depth Above Finished Flood Elevation: Enter the amount of water, in feet, that was recorded above the finished floor of the property. The flood depth can be provided using the best data available. Please be ready to support the information if requested by FDEM.

Structural Damage: Enter the total cost of structural damage due to each flood event. Damage costs may be documented with Insurance claims, receipts from repair of flood damages, FEMA Public Assistance Worksheets, property owner affidavit or other relevant source.

Content Damage: Enter the total cost of content damage due to each flood event. Damage costs may be documented with Insurance claims, receipts from repair of flood damages, FEMA Public Assistance Worksheets, property owner affidavit or other relevant source.

Displacement Costs: Enter the total displacement cost due to each flood event. Displacement costs occur when occupants (of residential, commercial, or public buildings) are displaced to temporary quarters while damage is repaired. These costs include rent and other monthly costs, such as furniture rental and utilities, and one-time costs, such as moving and utility hook-up fees. They can also include loss of business income for commercial buildings.

Application for Federal Assistance SF-424

*** 1. Type of Submission:**

- Preapplication
 Application
 Changed/Corrected Application

*** 2. Type of Application:**

- New
 Continuation
 Revision

*** If Revision, select appropriate letter(s):**

*** Other (Specify):**

*** 3. Date Received:**

06/05/2024

4. Applicant Identifier:

5a. Federal Entity Identifier:

5b. Federal Award Identifier:

State Use Only:

6. Date Received by State:

7. State Application Identifier:

8. APPLICANT INFORMATION:

*** a. Legal Name:**

Hernando County BOCC

*** b. Employer/Taxpayer Identification Number (EIN/TIN):**

59-1155275

*** c. UEI:**

MWKBKNTZ9SW7

d. Address:

*** Street1:**

15470 Flight Path Drive

Street2:

*** City:**

Brooksville

County/Parish:

*** State:**

FL: Florida

Province:

*** Country:**

USA: UNITED STATES

*** Zip / Postal Code:**

34604-0000

e. Organizational Unit:

Department Name:

Division Name:

f. Name and contact information of person to be contacted on matters involving this application:

Prefix:

Mr.

*** First Name:**

Jeffery

Middle Name:

*** Last Name:**

Rogers

Suffix:

Title:

County Administrator

Organizational Affiliation:

*** Telephone Number:**

(352) 754-4841

Fax Number:

*** Email:**

jr Rogers@hernandocounty.us

Application for Federal Assistance SF-424

*** 9. Type of Applicant 1: Select Applicant Type:**

B: County Government

Type of Applicant 2: Select Applicant Type:

Type of Applicant 3: Select Applicant Type:

* Other (specify):

*** 10. Name of Federal Agency:**

Federal Emergency Management Agency

11. Catalog of Federal Domestic Assistance Number:

CFDA Title:

*** 12. Funding Opportunity Number:**

FEMA-4734-DR-FL CFDA 97.039

* Title:

Hazard Mitigation Grant Program

13. Competition Identification Number:

Title:

14. Areas Affected by Project (Cities, Counties, States, etc.):

Add Attachment

Delete Attachment

View Attachment

*** 15. Descriptive Title of Applicant's Project:**

Structural elevation of 2 structures

Attach supporting documents as specified in agency instructions.

Add Attachments

Delete Attachments

View Attachments

Application for Federal Assistance SF-424

16. Congressional Districts Of:

* a. Applicant

* b. Program/Project

Attach an additional list of Program/Project Congressional Districts if needed.

17. Proposed Project:

* a. Start Date:

* b. End Date:

18. Estimated Funding (\$):

* a. Federal	<input type="text" value="434,826.49"/>
* b. Applicant	<input type="text" value="0.00"/>
* c. State	<input type="text" value="0.00"/>
* d. Local	<input type="text" value="144,942.16"/>
* e. Other	<input type="text" value="0.00"/>
* f. Program Income	<input type="text" value="0.00"/>
* g. TOTAL	<input type="text" value="579,768.65"/>

*** 19. Is Application Subject to Review By State Under Executive Order 12372 Process?**

- a. This application was made available to the State under the Executive Order 12372 Process for review on
- b. Program is subject to E.O. 12372 but has not been selected by the State for review.
- c. Program is not covered by E.O. 12372.

*** 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes," provide explanation in attachment.)**

Yes No

If "Yes", provide explanation and attach

21. *By signing this application, I certify (1) to the statements contained in the list of certifications and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 18, Section 1001)**

** I AGREE

** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.

Authorized Representative:

Prefix: * First Name:

Middle Name:

* Last Name:

Suffix:

* Title:

* Telephone Number: Fax Number:

* Email:

* Signature of Authorized Representative: 

* Date Signed:

ASSURANCES - CONSTRUCTION PROGRAMS

OMB Number: 4040-0009
Expiration Date: 02/28/2025

Public reporting burden for this collection of information is estimated to average 15 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 (0348-0042), Washington, DC 20503.

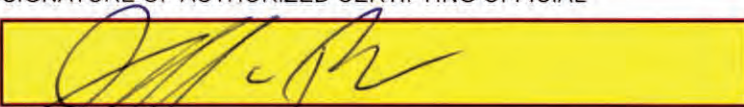
PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.

NOTE: Certain of these assurances may not be applicable to your project or program. If you have 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 project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, 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 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 non-discrimination 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 progressive 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. §§4728-4763) relating to prescribed standards of merit systems for programs funded under one of the 19 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. §§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. §§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. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§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) §§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 Act of 1968 (42 U.S.C. §§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.

11. Will comply, or has already complied, with the requirements of Titles 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 and federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
12. Will comply with the provisions of the Hatch Act (5 U.S.C. §§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. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333) regarding labor standards for federally-assisted construction subagreements.
14. Will comply 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.
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. §§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. §§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. §§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 protection 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 Amendments of 1996 and OMB Circular No. A-133, "Audits of States, Local Governments, and Non-Profit Organizations."
19. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.
20. Will comply with the requirements of Section 106(g) of the Trafficking Victims Protection Act (TVPA) of 2000, as amended (22 U.S.C. 7104) which prohibits grant award recipients or a sub-recipient from (1) Engaging in severe forms of trafficking in persons during the period of time that the award is in effect (2) Procuring a commercial sex act during the period of time that the award is in effect or (3) Using forced labor in the performance of the award or subawards under the award.

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL	TITLE
	County Administrator
APPLICANT ORGANIZATION	DATE SUBMITTED
Hernando County	6/7/24

THIS SECTION FOR STATE USE ONLY

FEMA-____-DR-FL

- Standard HMGP 5% Initiative Application Application Complete
 Initial Submission or Re- Submission

Support Documents

- Conforms w/ State 409 Plan
 In Declared Area
 Statewide

Eligible Applicant

- State or Local Government
 Private Non-Profit (Tax ID Received)
 Recognized Indian Tribe or Tribal Organization

Project Type(s)

- Wind
 Flood
 Other: _____

Community NFIP Status: (Check all that apply)

- Participating Community ID#: _____
 In Good Standing Non-Participating CRS

LMS Ranking: _____

County: _____

State Application ID: _____

(TIME-DATE STAMP HERE)

This application is for all Federal Emergency Management Agency (FEMA Region IV) Hazard Mitigation Grant Program (HMGP) proposals. Complete ALL sections and provide the documents requested. If you require technical assistance, contact the Florida Division of Emergency Management at DEM_HazardMitigationGrantProgram@em.myflorida.com.

Section I – Applicant

A. Applicant Instruction: Complete all sections that correspond with the type of proposed project

<u>Application Sections I-IV:</u>	All Applicants must complete these sections
<u>Environmental Review:</u>	All Applicants must complete these sections
<u>Maintenance Agreement:</u>	Any Applications involving public property, public ownership, or management of property
<u>Flood Control – Drainage Improvement Worksheet:</u>	Acquisition, Elevation, Dry Flood Proofing, Drainage Improvements, Flood Control Measures, Floodplain and Stream Restoration, and Flood Diversion – one worksheet per structure
<u>Generator Worksheet:</u>	Permanent, portable generators, and permanent emergency standby pumps
<u>Tornado Safe Room Worksheet:</u>	New Safe Room, Retrofit of existing structure, Community Safe Room, Residential Safe Room
<u>Hurricane Safe Room Worksheet:</u>	New Safe Room, Retrofit of existing structure
<u>Wind Retrofit Worksheet:</u>	Wind Retrofit projects only – one worksheet per structure
<u>Wildfire Worksheet:</u>	Defensible Space, Hazardous Fuels Reduction, Ignition Resistant Construction, other
<u>Drought Worksheet:</u>	Aquifers, other
<u>Utility Mitigation Worksheet</u>	Upgrades to sewer systems, upgrading electrical components for a utility, undergrounding electrical systems, etc.
<u>Request for Public Assistance Form:</u>	FEMA Form 90-49 (Request for Public Assistance): All applicants must complete, if applicable.
<u>Acquisition Forms:</u>	If project type is Acquisition, these forms must be completed. (Only one of the two <i>Notice of Voluntary Interest</i> forms is necessary.) <i>Model Statement of Assurances for Property Acquisition Projects Declaration and Release</i> <i>Notice of Voluntary Interest (Town Hall Version)</i> <i>Notice of Voluntary Interest (Single Site Version)</i> <i>Statement of Voluntary Participation</i> <i>FEMA Model Deed Restriction Language</i>
<u>Application Completeness Guidance / Checklist :</u>	All applicants are recommended to complete this checklist and utilize the guidance for completing the application.

B. Applicant Information:

FEMA-4734-DR-FL

DISASTER NAME: Hurricane Idalia

Title of Project: Hernando County Residential Elevations (TB)

- 1. Applicant (Organization): **Hernando County BOCC**
- 2. Applicant Type: State or Local Government Native American Tribe Private Non-Profit Special District
- 3. County: **Hernando**
- 4. State Legislative Senate District(s): **11**; State Legislative House District(s): **52/53** ;
Congressional House District(s): **12**
- 5. Federal Tax I.D. Number: **59-1155275** <https://fs.fldfs.com/dispub2/cvnhphst.htm>
- 6. Data Universal Numbering System (DUNS): **MWKBKNTZ9** *Unique Entity Identification (UEI)*
<https://sam.gov/SAM/>
- 7. Federal Information Processing Standards (FIPS) Code*: **053-99053-00** (**if your FIPS code is not known, see guidance*)
- 8. National Flood Insurance Program (NFIP) Community Identification Number: **120110**
(*this number can be obtained from the FIRM map for your area*)
- 9. **Point of Contact:** (Applicant staff serving as the coordinator of project)

Ms. Mr. First Name: **Michelle** Last Name: **Miller**
Title: **Grant Writer | Procurement Department**
Address: **15470 Flight Path Drive**
City: **Brooksville** State: **FL** Zip Code: **34604**
Telephone: **(352) 754-4020 ext. 24159** Email: **MLMiller@co.hernando.fl.us**

10. Application Prepared by:

Ms. Mr. First Name: _____ Last Name: _____
Title: _____
Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: _____ Email: _____
Organization: _____

11. Authorized Applicant Agent (proof of authorization authority required)

Ms. Mr. First Name: **Jeffery** Last Name: **Rogers, P.E.**
Title: **Hernando County Administrator**
Address: **15470 Flight Path Drive**
City: **Brooksville** State: **FL** Zip Code: **34604**
Telephone: **(352)754-4841** Email: **jrogers@hernandocounty.us**

Signature: 

Date: 6/7/21

12. Local Mitigation Strategy (LMS) Compliance

- a. All proposed projects must be included in the county's Local Mitigation Strategy (LMS) Project List, and on file with FDEM's Mitigation Bureau Planning Unit. Does your jurisdiction have a current FEMA Approved Mitigation Plan and this project is listed? Yes No
- b. Attached is a letter of endorsement for this project from the county's LMS Coordinator. Yes No
Ensure the LMS endorsement letter contains both the Total Estimated Projects Cost (Section IV. D.), along with the Estimated Federal Share (Section IV. I.1.) allocated to this project.
- c. The LMS project list and endorsement letter both have an estimated cost column and Federal Share amount that is within \$500.00 between the two. Yes No

13. Has this project been submitted under a previous disaster event? No
 Yes, provide the disaster number and project number (as applicable): _____

Section II – Project Description

A. Hazards to be Mitigated / Level of Protection

- Select the type of hazards the proposed project will mitigate:
 Flood Wind Storm surge Wildfire Other (list): _____
- Identify the type of proposed project:
 Elevation and retrofitting of residential or non-residential structure
 Acquisition and Relocation Acquisition and Demolition
 Wind retrofit Drainage project that reduces localized flooding
 Generator Other (explain) _____
- List the total number of persons that will be protected by the proposed project (include immediate population affected by the project only):
4
- List how many acres of "Total Impacted Area" is to be protected by the proposed project (include immediate area affected by the project only):
.13
- Fill in the level of protection and the magnitude of event the proposed project will mitigate. (e.g. 23 structures protected against the 100-year storm event (1% chance)
1 structure(s) protected against the **100** -year storm event (10, 25, 50, 100, or 500 year storm event)
_____ structure(s) protected against _____ mile per hour (mph) winds
- Check **all** item(s) the project may impact:

<input type="checkbox"/> Wetlands	<input type="checkbox"/> Water Quality	<input type="checkbox"/> Previously Undisturbed Soil
<input type="checkbox"/> Floodplain	<input type="checkbox"/> Coastal Zone	<input type="checkbox"/> Toxic or Hazardous Substances
<input type="checkbox"/> Historic Resources	<input type="checkbox"/> Fisheries	<input type="checkbox"/> Threatened & Endangered Species
<input type="checkbox"/> Vegetation Removal	<input type="checkbox"/> Public Controversy	<input type="checkbox"/> Potential for Cumulative Impacts
<input checked="" type="checkbox"/> Health & Safety	<input type="checkbox"/> Other _____	
- Engineered projects:** If your project has been already designed and engineering information is available, attach to your application **ALL** calculations, H&H study and design plans (e.g. Drainage Improvement, Erosion Control, or other special project types). No Yes If so, see Attachment #(s) _____.

B. Project Description, Scope of Work, and Protection Provided (Must be Completed in Detail)

Describe, in detail, the existing problem, the proposed project, and the scope of work. Explain how the proposed project will **solve** the problem(s) and provide the level(s) of protection described in Part A. Also, if available, attach a vendor's estimate and/or a contractor's bid for the scope of work. **Ensure that each proposed project is mitigation and not maintenance.**

- Describe the existing problems:
The homes of Diane Neste and Jeffery Stantz sit bellow the current Base Flood Elevation and has suffered numerous flooding events due to storms. The structures are in a V Zone requiring pilings to elevate. The home is vulnerable to future flooding events as well and requires elevation in order to mitigate the issue.
- Describe the type(s) of protection that the proposed project will provide:
The home of Diane Neste sits 9.9 feet bellow the base flood level. The home will be elevated 11.9 amount of feet allowing it to be two feet above freeboard and be in compliance with FEMA policy and Florida policy. The home of Jefferey Stantz is 7.67 feet below base folld elevation. The home will be elevated to 9.67 feet allowing it to be two feet above freeboard and be in compliance with FEMA policy and Florida policy. By elevating the homes it will be protected against the 100 year storm event.

3. Scope of Work (describe in detail what you are planning to do):

During the pre-construction period, elevation certificates will be obtained, soil testing will be performed, and eligible contractors will bid on each home for structural elevation to at least the required minimum lift height. Throughout the program, inspecting engineers, city/grant management, and the designated engineer of record will make periodic site visits to confirm project progress and quality/compliance of the work.

Homeowners will vacate the property during construction and return during the closeout process. Elevation contractors will obtain the required permits, bonding & insurance, and elevation design performed by a licensed professional engineer in the state of Florida. During the initial phases of construction, the selected elevation contractor will prepare the site, clear vegetation, and excavate around and under the structure as necessary in preparation for the lift.

Concrete will be cut, porches/landings disconnected, and detached garage connections (breezeways) separated as needed. Utilities will be disconnected, elevated, and reconnected by licensed plumbers and electricians as required. After exposing the existing foundation, the Contractor will tunnel, cut into the existing structure as needed, and push piles to the point of refusal (specified by the engineer of record) as required; the homes will be lifted using hydraulic lifts installed under the structure connected to a unified jacking machine utilizing I-Beams inserted in the priorly dug tunnels to support the structure during lifting. Temporary cribbing will be placed underneath to support the structure and jacks during lifting.

A grant-compliant foundation system, designed and inspected by the Engineer of Record, will be constructed for the lifted structure to rest on. The expected preliminary foundation system will be helical piles installed to support the structure(s) within the expected unstable soil conditions but will vary for each home as determined by the geotechnical reports. The space below the lowest habitable floor will be designed to allow for the entry and exit of flood waters through the use of flood ventilation (if enclosure wall is required per design) to achieve consistency with deed restrictions, local homeowners' association rules, all FEMA & NFIP requirements, and local floodplain and building codes. V zone structures will be constructed to maintain open access below the lowest habitable floor through leaving the space clear or installation of breakaway walls. Landings and stairs for ingress and egress will be constructed at each entry point. For homeowners demonstrating need with documentation, an ADA complaint ramp and/or mechanical lift will be installed for access.

Language from the acknowledgement of conditions document regarding insurance coverage will be added to the property's deed; homeowners will be required to obtain and maintain flood insurance coverage in perpetuity. During closeout, Homeowners will submit verification of updated flood insurance coverage and eligible temporary housing receipts for reimbursement to Project Management/the City. Elevation Contractors will provide homeowners with a copy of their final elevation certificate and stamped as-built drawings.

4. Describe any other on-going or proposed projects in the area that may impact, positively or negatively, the proposed HMGP Project:

There are no other projects that this project will impact.

Section III – Project Location (Fully describe the location of the proposed project.)

A. Site

- Describe the physical location of this project, including street numbers (or neighborhoods) and project site zip code(s). Provide precise longitude and latitude coordinates for the site utilizing a hand-held global positioning system (GPS) unit or the equivalent:

Site Location: **See PID-149279 Elevation Worksheet Hernando.pdf**

Address(es): _____

GPS coordinates (decimal degree format): _____

Project Zip Code(s): _____

- Titleholder:
- Is the project site seaward of the Coastal Construction Control Line (CCCL)? Yes No
- Provide the number of each structure type (listed below) in the project area that will be affected by the project. Include **all** structures in project area.

<input checked="" type="checkbox"/> Residential property: <u>2</u>	<input type="checkbox"/> Public buildings: _____
<input type="checkbox"/> Businesses/commercial property: _____	<input type="checkbox"/> Schools/hospitals/houses of worship: _____
<input type="checkbox"/> Other: _____	

B. Flood Insurance Rate Map (FIRM) Showing Project Site

1. <input checked="" type="checkbox"/> Attach one (1) copy of the FIRM map, a copy of the panel information from the FIRM, and, if available, the Floodway Map. FIRM maps are required for this application (if published for your area). Also, all attached maps must have the project site and structures clearly marked on the map. FIRMs are typically available from your local floodplain administrator who may be located in a planning, zoning, or engineering office. Maps can also be ordered from the Map Service Center at 1-800-358-9616. For more information about FIRMs, contact your local agencies or visit the FIRM site on the FEMA Web-page at https://msc.fema.gov/portal .								
2. Using the FIRM, determine the flood zone(s) of the project site (Check all zones in the project area) (See FIRM legend for flood zone explanations) (A Zone must be identified)								
<table border="0" style="width: 100%;"> <tr> <td><input checked="" type="checkbox"/> VE or V 1-30</td> <td><input type="checkbox"/> AE or A 1-30</td> </tr> <tr> <td><input type="checkbox"/> AO or AH</td> <td><input type="checkbox"/> A (no base flood elevation given)</td> </tr> <tr> <td><input type="checkbox"/> B or X (shaded)</td> <td><input type="checkbox"/> C or X (unshaded)</td> </tr> <tr> <td><input type="checkbox"/> Floodway</td> <td><input type="checkbox"/></td> </tr> </table>	<input checked="" type="checkbox"/> VE or V 1-30	<input type="checkbox"/> AE or A 1-30	<input type="checkbox"/> AO or AH	<input type="checkbox"/> A (no base flood elevation given)	<input type="checkbox"/> B or X (shaded)	<input type="checkbox"/> C or X (unshaded)	<input type="checkbox"/> Floodway	<input type="checkbox"/>
<input checked="" type="checkbox"/> VE or V 1-30	<input type="checkbox"/> AE or A 1-30							
<input type="checkbox"/> AO or AH	<input type="checkbox"/> A (no base flood elevation given)							
<input type="checkbox"/> B or X (shaded)	<input type="checkbox"/> C or X (unshaded)							
<input type="checkbox"/> Floodway	<input type="checkbox"/>							
<input type="checkbox"/> Coastal Barrier Resource Act (CBRA) Zone (Federal regulations strictly limit Federal funding for projects in this Zone; coordinate with your state agency before submitting an application for a CBRA Zone project).								
3. <input type="checkbox"/> If the FIRM Map for your area is not published , attach a copy of the Flood Hazard Boundary Map (FHBM) for your area, with the project site and structures clearly marked on the map.								
4. <input type="checkbox"/> Attach a copy of a Model Acknowledgement of Conditions for Mitigation in Special Flood Hazard Area								

C. Maps with Project Site and Photographs

- Attach a copy of a city or county scale map (large enough to show the entire project area) with the project site and structures marked on the map.
- Attach a USGS 1:24,000 TOPO map with project site **clearly** marked on the map.
- For **acquisition** or **elevation** projects, include copy of Parcel Map (Tax Map, Property Identification Map, etc.) showing each property to be acquired or elevated. Include the Tax ID numbers for each parcel, and Parcel information – including year built and foundation.
- Attach photographs (at a minimum 4 photographs) for each project site per application. The photographs should be representative of the project area, including any relevant streams, creeks, rivers, etc. and drainage areas that affect the project site or will be affected by the project, and labeled. For each structure, include the following angles: front, back and both sides.

Section IV – Budget/Costs

In order to assist applicants with filling out the following Budget section, we have provided the following instructions for your convenience. For this section, we ask that you provide details of all the estimated costs of the project, as it is used for the benefit-costs analysis as well as for the feasibility and effectiveness review.

For the cost sections relating to Materials, Labor, and Fees, it is important to note,

- Lump sums without supporting documentation showing a breakdown of those costs are not acceptable. For those items that will not fit in the spaces provided, attach the appropriate documentation to your application.
- Identify your match sources in sections B and I.
- Sub-Total cells will auto sum the costs in their respective columns.
- Do not factor management costs into parts A-C. If management costs are being requested, see part G.
- Contingency Costs need to be justified and reported as a separate line item in part E of this section. From left to right in that part, enter the desired percentage (maximum 5% of Material/Labor), the amount the percentage is to be applied to, and the resulting amount. **PLEASE NOTE-** These cells will not auto-calculate across the row, but the final cell will be calculated into the Final Project Cost below it. Take care that everything is calculated correctly.
- Pre-Award Costs: costs must be identified as a separate line item, AND a completed HMGP Pre-Award Cost Request Form MUST be submitted with this application, detailing the items/cost and requested start date.
- Mark all In-kind (donated) services with (**); In-house (employee) services with (***), per each line item.
- All funding sources (In-kind, In-house, Global Match, and Other Agencies) must be identified (below) AND identified on the Funding Sources - Section IV I.

For project management costs, in compliance with Disaster Relief and Recovery Act of 2018 (DRRA) and the subsequent FEMA Interim Policy #104-11-1, the Florida Division of Emergency Management has included a section for applicants to request, or refuse, project management funds that are available to them. Under this new policy, HMGP projects awarded under disasters declared on or after August 1, 2017, are eligible for project management costs up to 5 percent of their total project costs.

Applicants choosing to apply for this funding must detail the specific administrative costs in Part G of this section. These costs must be eligible administrative costs, conforming to the requirements set in 2 CFR Part 200 Subpart E. Applicants must ensure that their administrative costs are reasonable, allowable, allocable, and necessary for the performance of the federal award.

The State will allot these management costs on a project-by-project basis per the amount requested by the sub-recipient, up to 5 percent of the total project cost. A sub-recipient may request less than this, but no higher. These management costs will be considered a separate pool of funding and **WILL NOT** affect a project's benefit-cost analysis.

Management costs will be reimbursed per reimbursement request, and no more than 5 percent of any given reimbursement request amount. All management costs reimbursements will be contingent upon adequate documentation from the sub-recipient.

Management costs will be reimbursed at 100 percent of the amount of management costs requested, so far as they are adequately documented and are no more than 5 percent of the request. Any unused management costs at closeout following the final payment will be de-obligated. If the final total project cost results in an under-run, management costs will be reduced accordingly.

Applicants must make the determination to request or refuse management costs at the time of formal application submittal. The State will accept the initial determination from the applicant. There will be no recourse from the State for applicants wishing to change their initial determination after the application has been formally submitted.

A. Materials

<i>Item</i>	<i>Unit</i>	<i>Quantity</i>	<i>Cost per Unit</i>	<i>Cost</i>
Pins/Wedges	SQFT	1010	\$0.19	\$191.90
Cribbing	SQFT	2500	\$6.22	\$15,550.00
8x8x16 Headblocks	SQFT	2500	\$0.16	\$400.00
Pins & Shims	SQFT	2500	\$0.19	\$475.00
Concrete Grade Beams / Footings	SQFT	2500	\$9.67	\$24,175.00
Concrete Collumns	SQFT	2500	\$18.41	\$46,025.00
Steel Beams	SQFT	2500	\$12.60	\$31,500.00
Erosion Control Slab	SQFT	2500	\$14.00	\$35,000.00
Grout Piles & Beams	SQFT	2	\$1.11	\$2,775.00
Front Steps & Landings	EA	2	\$4,927.00	\$9,854.00
Rear Steps & Landings	EA	2	\$4,927.00	\$9,854.00
Electric Meter Landings & Steps	EA	2	\$6,570.00	\$13,140.00
Railing, Dumpster, Portable Restroom	EA	1	\$6,097.10	\$6,097.10
<u>Sub-Total</u>				\$195,037.00

B. Labor Include equipment costs. Indicate all "soft" or in-kind matches (**).

<i>Description</i>	<i>Hours</i>	<i>Rate</i>	<i>Cost</i>
Tree Trimming	2	\$1,810.25	\$3,620.50
Existing Foundation Removal	2	\$2,049.41	\$4,098.82
Helical Piles Install	2	\$62,624.41	\$125,248.82
Unified Jacking	2	\$37,189.97	\$74,379.94
Lift Crew - House Raising	2	\$12,122.22	\$24,244.44
Lift Crew - Cribbing removal & Backfill	2	\$3,030.55	\$6,061.10
Water Disconnect & Water Reconnect	2	\$4,107.00	\$8,214.00
Gas Riser Disconnect & Gas Riser Reconnect	2	\$1,344.00	\$2,688.00
Electrical Disconnect & Electrical Reconnect	2	\$8,212.00	\$16,424.00
Site cleanup	2	\$1,600.00	\$3,200.00
<u>Sub-Total</u>			\$268,179.62

C. Fees Paid Include any other costs associated with the project.

<i>Description of Task</i>	<i>Hours</i>	<i>Rate</i>	<i>Cost</i>
<i>*Pre-Award</i>			
Elevation Certificate	4	\$833.50	\$3,334.00
Lot Survey	2	\$2,001.00	\$4,002.00
Engineering	2	\$8,335.00	\$16,670.00
Permitting	2	\$834.00	\$1,668.00
Insurance/Bonding/Warranty	2	\$13,625.00	\$27,250.00
Construction Inspections	2	\$2,125.00	\$4,250.00
Geotechnical Report	2	\$4,400.00	\$8,800.00
Temporary Housing	2	\$9,360.00	\$18,720.00
Structural Integrity Assesment	2	\$2,125.00	\$4,250.00
<u>Sub-Total</u>			\$88,944.00

D. Total Estimated Project Cost **\$552,160.62**

E. Contingency Costs (maximum 5% of Material/Labor) 5.00% \$27,608.03 \$27,608.03

F. Final Project Cost **\$579,768.65**

Note: To be eligible for HMGP Pre-Award costs – the costs must be identified as a separate line item in the estimate above, AND a completed HMGP Pre-Award Cost Request Form MUST be submitted with this application, detailing the items/cost requesting.

Mark all In-kind (donated) services with (**); In-house (employee) services with (***), per each line item.

I. Funding Sources (round figures to the nearest dollar)

The maximum FEMA share for HMGP projects is 75%. The other 25% can be made up of State and Local funds as well as in-kind services. HMGP funds may be packaged with other Federal funds, but other Federal funds (except for Federal funds that lose their Federal identity at the State level, such as CDBG, and certain tribal funds) may not be used for the Non-Federal share of the costs.

1.	Estimated Federal Share	\$434,826.49	75 % of Total	(Maximum 75%)
2.	Non-Federal Shares			
3.	Estimated Local Shares	\$144,942.16	25 % of Total	(Cash)
4.			% of Total	(In-Kind**)
5.			% of Total	(In-House***)
6.			% of Total	(Global Match****)
7.	Other Agency Share <i>(Identify Non-Federal Agency and availability date)</i>		% of Total	
<hr/>				
8.	Total Funding sources from above	\$579,768.65	100.00% Total	(Equals 100%)

- **Identify proposed eligible activities directly related to project to be considered for In-Kind services in Section IV.C. Fees
 - ***Identify proposed eligible activities directly related to project to be considered for In-House services in Section IV.C. Fees
 - ****Separate project applications must be submitted for each Global Match project.
- Global Match Project Number and Title: _____

9.	Total Estimated Management Costs	Requested Available	\$28,988.43	5% of Total	(Max Allowed)
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J. Project Milestones/Schedule of Work

List the major milestones in this project by providing an estimated time-line for the critical activities not to exceed a period of 3 years (36-months) of performance. (e.g. Contracting, Designing, Engineering, Permitting, Inspections, closeout, etc.)

Milestone(s)	Number of Months to Complete
State and Local Contracting	3
Construction Plan / Technical Specifications	3
Bidding / Local Procurement	3
Permitting	27
Construction / Installation	3
Local Inspections / Compliance	3
State Final Inspections / Compliance	3
Closeout Compliance	3
Total	48 Months

Section V. Environmental Review and Historic Preservation Compliance

(NOTE: This application cannot be processed if this section is not completed.)

Because the HMGP is a federally funded program, all projects are required to undergo an environmental and historic preservation review as part of the grant application process. Moreover, all projects must comply with the National Environmental Policy Act (NEPA) and associated Federal, State, Tribal, and Local statutes to obtain funding. **NO WORK can be done prior to the NEPA review process. If work is done on your proposed project before the NEPA review is completed, it will NOT be eligible for Federal funding.**

A. The following information is required for the Environmental and Historic Preservation review:

All projects must have adequate documentation to determine if the proposed project complies with NEPA and associated statutes. The State Environmental Staff provide comprehensive NEPA technical assistance for Applicants, with their consent, to complete the NEPA review. The type and quantity of NEPA documents required to make this determination varies depending upon the project's size, location, and complexity. However, at a minimum, provide the applicable documentation from this section to facilitate the NEPA compliance process.

- 1. Detailed project description, scope of work, and budget/costs (Section II and Section IV of this application).
- 2. Project area maps (Section III, part B & C of this application).
- 3. Project area/structure photographs (Section III, part C of this application).
- 4. Preliminary project plans.
- 5. Project alternatives description and impacts (Section V of the application).
- 6. Complete the applicable project worksheets.
Documentation showing dates of construction are required for all structures.
- 7. Environmental Justice – Provide any applicable information or documentation regarding low income or minority populations in the project area. See Section V.B of this application for details.
- 8. Provide any applicable information or documentation referenced on the *Information and Documentation Requirements by Project Type* below.

B. Executive Order 12898; Environmental Justice for Low Income and Minority Population:

- 1. Are there low income or minority populations in the project area or adjacent to the project area?
 No Yes; describe any disproportionate and adverse effects to these populations:

- 2. To help evaluate the impact of the project, explain below or attach any other information that describes the population, or portion of the population, that would be either disproportionately or adversely affected. Include specific efforts to address the adverse impacts in your proposal narrative and budget.
No communities will be adversely affected as a result of this project.

C. Tribal Consultation (Information Required)

Section 106 of the National Historic Preservation Act (NHPA) requires federal agencies to take into account the effect of their undertakings on historic properties. The NHPA requires that agencies must complete this process prior to the expenditure of any Federal funds on the undertaking. A Tribal Consultation is required for any project disturbing ground or moving soil, including but not limited to: drainage projects; demolition; construction; elevation; communication towers; tree removal; utility improvements.

1. Describe the current and future use of the project location. A land use map may be provided in lieu of a written description.

The current and future use of this location is for a residential home.

2. Provide information on any known site work or historic uses for project location.

No known site work or historic uses for this location.

- Attach a copy of a city or county scale map (large enough to show the entire project area) with the horizontal limits (feet) and vertical depths (square feet) of all anticipated ground disturbance of 3 inches or more.

D. Alternative Actions (Information Required)

The NEPA process requires that at least two alternative actions be considered that address the same problem/issue as the proposed project. In this section, list **two feasible** alternative projects to mitigate the hazards faced in the project area. One alternative is the "No Action Alternative".

1. No Action Alternative

Discuss the impacts on the project area if no action is taken.

If no action is taken the home will continue to flood when storms or storm events come through. This will cause structural damage to the home, pose an environmental issue due to any debris that gets washed away, and put the homeowner in a state of peril due to flooding. Over time the home will have to be elevated anyways either due to structural issues or a new build should the damage become severe enough.

2. Other Feasible Alternative

Describe a feasible alternative project that would be the next best solution if the primary alternative is not accomplished. This could be an entirely different mitigation method or a significant modification to the design of the current proposed project. Include a Scope of Work, engineering details (if applicable), estimated budget and the impacts of this alternative. Complete *all* of parts **a-e** (below).

a. Project Description for the Alternative

Describe, in detail, the alternative project, and explain how the alternative project will solve the problem(s) and/or provide protection from the hazard(s). Also, provide pros and cons for this alternative and a reason for why it was not selected.

A project alternative to elevating the home would be to have the county acquire the property through an acquisition project instead. This would allow the homeowner to vacate the flood-prone areas and turn the lot into a non-critical area. The main problem with this would be the fact that the homeowner is unwilling to sell their property and this being a voluntary project, may prove to be infeasible. Along with this the lot itself is not in an area that would be useful to the county to invest resources in.

b. Project Location of the Alternative (describe briefly, if different from proposed project)

Location would remain the same.

- Attach a map or diagram showing the alternative site in relation to the proposed project site (if different from proposed project)

c. Scope of Work for Alternative Project

This alternative project would involve officially appraising the property, acquiring the property from the homeowner, demolishing the existing structure. After this the land would be repurposed for public use and resorted to a natural state depending on what the county wishes to do with the property.

d. Impacts of Alternative Project

Discuss the impact of this alternative on the project area. Include comments on these issues as appropriate: Environmental Justice, Endangered Species, Wetlands, Hydrology (Upstream and Downstream Surface Water Impacts), Floodplain/Floodway, Historic Preservation and Hazardous Materials.

There would be no major impacts.

e. Estimated Budget/Costs for Alternative Project

In this section, provide details of all the estimated costs of the alternative project (round figures to the nearest dollar). A lump sum budget is acceptable.

Materials:	
Labor:	
Fees:	\$156,650.00
Total Estimated Project Cost:	\$156,650.00

HMGP ENVIRONMENTAL REVIEW
Information and Documentation Requirements by Project Type

Retrofits to Existing Facilities/Structures

Elevations

Acquisitions with Demolition

- ✓ Dates of Construction
- ✓ Ground disturbance map for projects with 3 inches or more of ground disturbance
- ✓ Structure photographs

Drainage Improvements

- ✓ Engineering plans/drawings
- ✓ Permit or Exemption letter to address any modifications to water bodies and wetlands
 - o Department of Environmental Protection
 - o Water Management District
 - o U.S. Army Corps of Engineers
- ✓ Ground disturbance map for projects with 3 inches or more of ground disturbance.
- ✓ Concurrence from U.S. Fish and Wildlife addressing any impacts to wildlife, particularly endangered and threatened species and their habitats.
- ✓ If the project is in a coastal area, attach a letter from the National Marine Fisheries Service addressing impacts to marine resources.
- ✓ Concurrence from Natural Resource Conservation Service if project is located outside city limits and may impact prime or unique farmland.
- ✓ Concurrence from your Local Floodplain Manager – if project is located in a floodplain.

Note: This is a general guideline for most projects. However, there will be exceptions. Consult with state environmental staff on project types not listed.

Section VI – Maintenance Agreement

All applicants whose proposed project involves the retrofit or modification of existing public property or whose proposed project would result in the public ownership or management of property, structures, or facilities, must first sign the following agreement prior to submitting the application to FEMA.

(NOTE: Not applicable to projects solely related to residential or private property.)

The BOCC of Hernando County, State of Florida, hereby agrees that if it receives any Federal aid as a result of the attached project application, it will accept responsibility, at its own expense if necessary, for the **routine** maintenance of any real property, structures, or facilities acquired or constructed as a result of such Federal aid. Routine maintenance shall include, but not be limited to, such responsibilities as keeping vacant land clear of debris, garbage, and vermin; keeping stream channels, culverts, and storm drains clear of obstructions and debris; and keeping detention ponds free of debris, trees, and woody growth.

The purpose of this agreement is to make clear the Sub-recipient's maintenance responsibilities following project award and to show the Sub-recipient's acceptance of these responsibilities. It does not replace, supersede, or add to any other maintenance responsibilities imposed by Federal law or regulation and which are in force on the date of project award.

Signed by Jeffrey Rogers the duly authorized representative
(printed or typed name of signing official)

County Administrator
(title)

This 7 (day) of June (month), 2024 (year).

Signature*  _____

***Note: The above signature must be by an individual with legal signing authority for the respective local government or county (e.g., the Chairperson, Board of County Commissioners or the County Manager, etc.)**

HMGP Application Completeness Guidance/Checklist

This guidance/checklist contains an explanation, example and/or reference for information requested in the application. Use this list to assure your application is complete and includes the required information for HMGP projects. The appropriate documentation must also be attached. It is important to note that this list is similar to the form that will be used during the application sufficiency review by the HMGP staff.

Project Title: _____

Applicant: _____

Application Information	Explanation of Information Required	✓
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Section I

B. Applicant Information

FEMA__-DR-FL	Type in the four digit number FEMA assigned to the disaster that this application is being submitted under. (Example: 4337, 4283)	<input checked="" type="checkbox"/>
DISASTER NAME	Type in the Disaster name. (Example: Hurricane Irma, Tropical Storm Fay)	<input checked="" type="checkbox"/>
Title of Project	The project title should include: 1) Name of Applicant, 2) Name of Project, 3) Type of Project. (Example: City of Tallahassee, City Hall Building, Wind Retrofit)	<input checked="" type="checkbox"/>
1. Applicant	Name of organization applying. Must be an eligible applicant.	<input checked="" type="checkbox"/>
2. Applicant Type	State or local government, recognized Native American tribe, or private non-profit organization. If private non-profit, attach documentation showing legal status as a 501(C). (Example: IRS letter, Tax Exempt Certificate)	<input checked="" type="checkbox"/>
3. County	Indicate county in which the project is located.	<input checked="" type="checkbox"/>
4. State Legislative and Congressional District(s)	Specify the appropriate State Senate, House and Congressional District code for the project site . For multiple sites, list codes for each site. http://www.myfloridahouse.gov/sections/representatives/myrepresentative.aspx	<input checked="" type="checkbox"/>
5. Federal Tax I.D. Number	List the Federal Employer's Identification Number (FEIN), also known as Federal Tax Identification number, 9-digit code. May be obtained from your finance/accounting department.	<input checked="" type="checkbox"/>
6. DUNS Number	Include Data Universal Numbering System (DUNS) number in appropriate location on application. Typically, this number can be obtain through your finance department. If not, use the link below to look up your entity. If none, exists you can use the same link to request one. https://www.dnb.com/duns-number.html	<input checked="" type="checkbox"/>
7. FIPS Code	List the Federal Information Processing Standards (FIPS) Code. May be obtained from your finance/accounting/grants department. If none, submit FEMA Form 90-49. See state website under the relevant disaster (https://floridadisaster.org/dem/mitigation/hazard-mitigation-grant-program/)	<input checked="" type="checkbox"/>
8. NFIP ID Number	List the National Flood Insurance Program (NFIP) number. You must be a participating NFIP member to be eligible for HMGP funding. Make sure that the number is the same as the panel number on the FIRM provided with the application.	<input checked="" type="checkbox"/>
9. Point of Contact	Provide all pertinent information for the point of contact. This person serves as the coordinator of the project. If this information changes once the application is submitted, please contact the HMGP staff immediately.	<input checked="" type="checkbox"/>
10. Application Prepared By	Provide the preparer information. May be different from the point of contact (line 9) and/or the applicant's agent (line 11).	<input type="checkbox"/>
11. Authorized Applicant Agent	An authorized agent must sign the application. <i>"An authorized agent is the chief elected official of a local government who has signature authority, so for a county it would be the Chairman of the Board of County Commissioners and for a municipality it would be the Mayor (the exact title sometimes varies). Any local government may delegate this authority to a subordinate official (like a City or County Manager) by resolution of the governing body (the Board of County Commissioners or Board of City Commissioners). If a local government delegates signature authority, a copy of the resolution by the governing body authorizing the signature authority for the individual signing must be provided."</i>	<input checked="" type="checkbox"/>

	For Private Non-Profit: A member of its Board of Directors or whoever has authority to authorize funding for such a project. If this task is delegated down, a copy of a resolution confirming this must be provided.	
12. LMS Compliance	<p>a) LMS Project List: All proposed projects must be included in the county's Local Mitigation Strategy (LMS) Project List and must be on file with FDEM's Mitigation Bureau Planning Unit.</p> <p>b) LMS Endorsement Letter: All proposed projects must include an endorsement letter from the county's Local Mitigation Strategy Coordinator. You may use 1 letter as long as it includes every proposed project.</p> <p>c) Estimated Costs & Application Costs: The LMS Project List must include an Estimated Cost column and each HMGP project application must be within \$500.00 of that Project List's estimated cost. Also ensure that the Federal Cost Share indicated on the LMS Coordinator's Endorsement Letter exactly matches the Federal Cost Share indicated within the application. Ensure the LMS endorsement letter contains both the Total Estimated Projects Cost (Section IV. D.), along with the Estimated Federal Share (Section IV. I.1.) allocated to this project.</p> <p>A letter of endorsement for the project and its priority number from the Local Mitigation Strategy Project List must be included. Refer to Sample LMS Letter. Applications without a letter of endorsement will not be processed. (44 CFR 201.6 Local Mitigation Plans)</p>	<input type="checkbox"/>
13. Previous Submittal	If the project has been previously submitted under another disaster, provide the disaster number, the project number, and the title of the project.	<input checked="" type="checkbox"/>

Section II - Project Description

A. Hazards to be Mitigated/Level of Protection

1. Type of Hazards	Type of Hazards the Proposed Project will Mitigate: Identify the hazard(s) that the proposed project will mitigate. More than one hazard may be selected.	<input checked="" type="checkbox"/>
2. Identify the Type of Project	Identify the Type of Proposed Project: Describe the mitigation project being proposed. (Example: drainage, wind retrofit, generator etc.)	<input checked="" type="checkbox"/>
3. Number of Persons Protected	Explain how many people will be protected by or benefit from the proposed project. (Example: A drainage project improving a residential area of 23 homes, with an average household of 2 people = 46 people)	<input checked="" type="checkbox"/>
4. Total Impacted Area	Explain how many acres will be impacted from the proposed project: Drainage/Berm/Pond/Culverts/Flood hazard projects: combination of the area to be protected and ground disturbance must not exceed 25 acres.	
5. Level of Protection	Specify the level of protection and magnitude of the event the proposed project will mitigate. Attach support documentation that verifies the stated level of protection. (Example: In a wind retrofit project, it will be the design wind speed to comply with the Florida Building Code requirements. In a drainage project, it will be the implemented design level, e.g. a 25-year FDOT design standard for culvert.)	<input checked="" type="checkbox"/>
6. Project Impact	Identify all the items the project may impact or are within the project area.	<input checked="" type="checkbox"/>
7. Engineered Projects (e.g. Drainage)	Include available engineering calculations, studies, and designs for the proposed project showing results from applied Recurrence Interval scenarios before and after mitigation. (Number of structures, building replacement value, depth of the water, structural damages, content damages, displacement, road closures, etc.)	<input checked="" type="checkbox"/>

B. Project Description, Scope of Work, and Protection Provided (Must be Completed in Detail)

1. Existing Problem	Describe the existing problem, location, source of the hazard, and the history and extent of the damage. Include newspaper articles, insurance documentation, photographs, etc. If this project is eligible for PA (406) mitigation activities, describe the 406 activities.	<input checked="" type="checkbox"/>
2. Type of Protection	Determine how the funding will solve the existing problem and provide protection.	<input checked="" type="checkbox"/>
3. Scope of Work:	What the Project Proposes to Do: Determine the work to be done. The scope of work must meet eligibility based on HMGP regulations and guidance. Explain how the proposed problem will be solved. (NOTE: The proposed project must be a	<input checked="" type="checkbox"/>

	mitigation action, not maintenance.) <i>Does the proposed project solve a problem independently or constitute a functional part of a solution where there is assurance that the project as a whole will be completed (44 CFR 206.434[c][4])? Does the proposed project address a problem that has been repetitive or that poses a significant risk to public health and safety if left unresolved (44 CFR 206.434[c][5][i])?</i> Projects that merely identify or analyze hazards or problems are not eligible.	
4. On-Going or Proposed Projects in the Area	Determine if other projects, zoning changes, etc. are planned (particularly in the same watershed if flooding is being addressed) that may negatively or positively impact the proposed project. If there is a drainage project or downstream issue elsewhere, it may eliminate the current flooding issue, erasing the need for the proposed project. Response applies to drainage and acquisition projects. N/A is appropriate in wind retrofit shutter projects only. If this project is also being considered under the Public Assistance Program (406), describe in detail the 406 mitigation activities and/or services. Do not include project costs associated with this HMGP application.	<input checked="" type="checkbox"/>

Section III - Project Location

A. Site

1. Physical Location	List the physical location of the project site(s) including the street number(s), zip code(s) and GPS coordinates (latitude/longitude, in decimal degrees). The physical address must correspond with the address locations specified on maps submitted with the application.	<input checked="" type="checkbox"/>
2. Titleholder	Provide the titleholder's name.	<input checked="" type="checkbox"/>
3. Project Seaward of the CCCL?	Determine if the project site is located seaward of the Coastal Construction Control Line. https://floridadep.gov/water/coastal-construction-control-line	<input checked="" type="checkbox"/>
4. Number and Types of Structures Affected	Specify the number and type of properties affected by the project. (Example: Drainage project that affects 100 homes, 15 businesses and 2 schools.) What does the project protect? Should have a number next to the box that is checked. (See Section II, Item A.5 – detail of these totals)	<input checked="" type="checkbox"/>

B. Flood Insurance Rate Map (FIRM) Showing Project Site

1. Copies of FIRM	Attach a copy (or copies) of the FIRM and clearly identify the project site. The FIRM Panel number must be included. To obtain a FIRM map, go to https://msc.fema.gov/portal . See instructions on How to make a FIRMette.	<input checked="" type="checkbox"/>
2. Flood Zone Determination	Specify the flood zone(s) of the project site(s). If project is located in a Special Flood Hazard Area. Amount of coverage must be equal to or greater than the amount of Federal mitigation funding obligated to the project.	<input checked="" type="checkbox"/>
3. Flood Hazard Boundary Map (FHBM)	Not required if a copy of the FIRM is attached.	<input checked="" type="checkbox"/>
4. Model Acknowledgement of Conditions form	The Model Acknowledgement of Conditions for Mitigation in Special Flood Hazard Area form is required for those structures receiving federal funds that will also remain in the special flood hazard area by the close of the project. This form is required at application. It can be found on FEMA's website at https://www.fema.gov/media-library/assets/documents/15677	<input checked="" type="checkbox"/>

D. C. Maps with Project Site and Photographs

1. City/County Map with Project Site	The project site and staging location (if applicable) should be clearly marked on a legible City/County map. The map should be large enough to show the project site. More than one map may be required.	<input checked="" type="checkbox"/>
2. USGS TOPO with Project Site	The project site should be clearly marked on a legible USGS 1:24,000 TOPO map. To obtain a TOPO map, go to https://ngmdb.usgs.gov/topoview/	<input checked="" type="checkbox"/>
3. Parcel/Tax Map	A Parcel, Tax or Property Identification map is required <u>only</u> for acquisition and elevation projects. The location of the structure must be clearly identified.	<input checked="" type="checkbox"/>
4. Site Photographs	At least four photographs are required that clearly identify the project site. The photos must be representative of the project area, including any relevant streams, creeks, rivers, etc., and drainage areas that affect the project site or will be affected by the project. The front, back and both side angles are required for each structure. For acquisition and elevation projects, a photo taken away from the structure (in front toward the street, and in back toward backyard) to show the area along with	<input checked="" type="checkbox"/>

	photographs of specific elements of the structure affected by the project (windows for shutters or window replacements) should also be provided. Label photographs appropriately. In addition, CDs may be submitted.	
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Section IV - Budget/Costs

Make sure all calculations are correct. Provide a breakdown of materials, labor and fees for the proposed project. Support documentation must be attached, i.e. vendor's quote, professional estimate (from engineer, architect, local building official, etc.). The proposed budget line items should represent allowable costs associated with the scope of work. Contingency Cost should be included as a line item in the budget section, and justified – Maximum allowed is 5%, and is required to complete this section; it will be used for the Benefit-Cost Analysis (BCA). Costs should be accurate, complete and reasonable compared to industry standards. Make sure the total cost is correct on the entire application.

A. Materials	List materials and their associated costs. Provide breakdown.	<input checked="" type="checkbox"/>
B. Labor	Provide a breakdown of description, hours, rate, and cost or lump sum labor cost. Can use in-kind contribution as part of the 25% match. (Attach support documentation for in-kind, in-house to detail wages and salaries charged for any contribution. No overtime wages can be used to satisfy match contributions).	<input checked="" type="checkbox"/>
C. Fees Paid	Provide a breakdown of associated fees i.e., consultants, studies, engineering, permits, and project management. Maintenance is not an allowable cost under HMGP. <i>Pre-award costs may be requested (See Pre-award Costs guidance).</i>	<input checked="" type="checkbox"/>
D. Total Estimated Project Cost	This number includes all project costs without contingency costs included. Make sure all calculations are correct.	<input checked="" type="checkbox"/>
E. Contingency Cost	Per FEMA's HMA Guidance (Section VI Part D.3.4), a contingency cost is, "an allowance in the total cost estimate to cover situations that cannot be fully defined at the time the cost estimate is prepared but that will likely result in additional eligible costs. Allowances for major project scope changes, unforeseen risks, or extraordinary events may not be included as contingency costs." The applicant may request up to 5% of material/labor costs. As with other line items, the applicant must justify these contingency costs based on the nature of the project at application. If an applicant wants to include contingency costs, they will need to enter the percentage that they require as well as what amount they want that percentage to be applied to. Type the resulting calculation in the final cell on the right. These cells will NOT auto-calculate. Be sure that they are calculated correctly.	<input checked="" type="checkbox"/>
F. Final Project Cost	This number includes any contingency costs that were requested. The final BCA will use this number in its final calculation.	<input checked="" type="checkbox"/>
G. Project Management Costs	After reading the guidance provided on pg. 5, select either YES or NO to indicate your need for management costs for this project. If YES , provide a breakdown of description, hours, rate and costs for requested management costs. If NO , continue to Part I.	<input checked="" type="checkbox"/>
H. Total Estimated Management Costs Requested	This will auto complete based on what is entered into the cost cells above. Your request must not exceed 5 percent of the total project cost available for this project.	<input checked="" type="checkbox"/>

I. Funding Sources (round figures to the nearest dollar)

The proposed sources of non-federal matching funds must meet eligibility requirements. (Except as provided by Federal statute, a cost-sharing or matching requirement may not be met by costs borne by another Federal grant.) 2 CFR Part 200.306.

1. Estimated Federal Share	The estimated Federal share is generally 75%. If the Federal share is not 75%, assure actual amount is entered. It could be 50.1234% or 35.1234%, etc. of the total dollar amount of project depending on county LMS allocation and priority. This figure cannot exceed 75%.	<input checked="" type="checkbox"/>
2. Non-Federal Share	May include all 3 sources, i.e. cash, in-kind and global match, as long as the total is a minimum of 25%. Match cannot be derived from a federal agency except Federal funds that lose their federal identity (e.g., CDBG funding and certain tribal funding).	<input checked="" type="checkbox"/>
3. Cash	Cash- Local funding will be utilized for the non-federal share. Enter amount of cash and percentage of total that amount represents.	<input checked="" type="checkbox"/>
4. Total In-Kind	May use materials, personnel, equipment, and supplies owned, controlled and operated from within governing jurisdiction as an in-kind match. <i>Third party in-kind contributions would be volunteer services, employee services from other</i>	<input type="checkbox"/>

	<i>organizations furnished free of charge, donated supplies, and loaned equipment or space. The value placed on these resources must be at a fair market value and must be documented. If in-kind is claimed from outside the applicant jurisdiction, it must be cash only. ** Identify proposed eligible activities in Section IV B. and C. as a separate line with In-kind written as a part of the description.</i>	
5. Total In-house	Sub-Recipient employees, equipment, etc. – internal services (must utilize the Personnel Activity Report or the Equipment Activity Report for the Request for Reimbursement)	<input type="checkbox"/>
6. Total Project (Global) Match	Project (global) match must 1) meet all the eligibility requirements of HMGP; and 2) begin after FEMA's approval of the match project. A separate HMGP application must be submitted for global match projects. Indicate which project(s) will be matched. <i>The global match is not required to be an identical project. Projects submitted as global match for another project must meet the same period of performance time constraints as the HMGP.</i>	<input type="checkbox"/>
7. Other Agency Share	Identify Non-Federal Agency and availability date; provide the documentation from the agency. (e.g., CDBG funding, and certain tribal funding)	<input type="checkbox"/>
8. Total Funding	Total must represent (100%) of the total estimated project cost. Ensure that percentages match corresponding cost-shares and the total matches the Budget (in Section IV. F. - Total Estimated Project Cost).	<input type="checkbox"/>
9.	Your requested amount must be equal to or less than 5 percent of the total project cost	<input type="checkbox"/>

J. Project Milestones/Schedule of Work

1. Milestones (Schedule)	Identify the major milestones in the proposed project and provide an estimated time-line (e.g. <i>Designing, Engineering – 3 months, Permitting – 6 months, Procurement – 30 days, Installation – 6 months, Contracting – 1 month, Delays, Project Implementation, Inspections, Closeout, etc.</i>) for the critical activities not to exceed a period of 3 years (36-months) for performance. Milestones should not be grouped together but listed individually. Allot for the appropriate amount of time for final inspection and closeout (about 3 months).	<input type="checkbox"/>
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Section V - Environmental Review & Historic Preservation Compliance

No work can begin prior to the completion of the environmental (NEPA) review. In order for the Environmental staff to conduct the NEPA review, all sections listed below must be completed.

1. Description, SOW & Budget	Detailed Project Description, Scope of Work & Budget/Costs. Complete Sections II & IV of the application.	<input checked="" type="checkbox"/>
2. Area Maps	Project area Maps - Attach a copy of the maps and clearly mark the project site, and place the specific project structure(s) on map(s). Complete Section III, part B & C of the application.	<input checked="" type="checkbox"/>
3. Project Area/Structure Photographs	Complete Section III part C of the application.	<input checked="" type="checkbox"/>
4. Preliminary Project Plans	For shutters see the scope of work and for drainage & elevation see engineering drawings.	<input checked="" type="checkbox"/>
5. Project Alternatives	Complete Section V part D. of this application.	<input checked="" type="checkbox"/>
6. Project Worksheets	Dates of construction are required for all structures. See worksheets.	<input checked="" type="checkbox"/>
7. Environmental Justice Documentation	See Section V.B for applicable information.	<input checked="" type="checkbox"/>
8. Information/ Documentation Requirements by Project Type	Provide any of the required documentation as listed at the end of Section V in the Information and Documentation Requirements by Project Type that may have already been obtained.	<input checked="" type="checkbox"/>

B. Executive Order 12898, Environmental Justice for Low Income and Minority Population

1. Disproportionate Effects	Determine if there are populations in either the project zip code or city that are characterized as having a minority background or living below the poverty level. If yes,	<input type="checkbox"/>
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	complete the rest of Section V, part B. Describe any disproportionate effects that these populations would experience if the project were completed.	<input type="checkbox"/>
2. Population Affected	Describe the population affected by this project and the portion of the population adversely impacted. Attach any documentation and list the attachments here.	<input checked="" type="checkbox"/>

C. Information required for Tribal Consultation

Documentation for Tribal Consultation	For all projects with any ground disturbing activities of 3 inches or more, complete Section V part C.	<input type="checkbox"/>
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D. Alternative Actions

1. No Action Alternative	Discuss the impacts on the project area if no action is taken.	<input checked="" type="checkbox"/>
2. Other Feasible Alternative Action	This is a FEMA and FDEM requirement for any Application Review. A narrative discussion of at least three project alternatives (from No Action to the most effective, practical solution) and their impacts, both beneficial and detrimental is required. It is expected that the jurisdiction has completed sufficient analysis to determine the proposed project can be constructed as submitted and it supports the goals and objectives of the FEMA approved hazard mitigation plan. Has the proposed project been determined to be the most practical, effective and environmentally sound alternative after consideration of a range of options? (44 CFR 206.434[c][5][iii])	<input checked="" type="checkbox"/>
a. Project Description	It is very important and a requirement that an Alternative project is submitted. NEPA requires that at least three alternatives must be presented to mitigate the problem. In addition to the proposed action and no action, one other feasible alternative must be provided. Describe the surrounding environment. Include information regarding both natural (i.e., fish, wildlife, streams, soils, plant life) and built (i.e., public services, utilities, land/shoreline use, population density) environments. Describe how the alternative project will solve the problem and provide protection from the hazard. Provide enough detail to describe the project for the evaluation panel to decide the best course of action for the state. Include any appropriate diagrams, sketch maps, amount of materials and equipment, dimensions of project, amount of time required to complete, etc.	<input checked="" type="checkbox"/>
b. Project Location of the Alternative		
c. Scope of Work – Alternative Project		
d. Impacts of the Alternative Project		
e. Estimated Budget/Costs for the Alternative Project		
Materials, Labor, and Fees Paid	Detailed line items are not required. Just enter a total amount.	<input checked="" type="checkbox"/>
Total Estimated Project Costs	Total cost is required. Vendor quote is not required. A lump sum budget may be submitted as justification to why this alternative was not chosen.	<input checked="" type="checkbox"/>

Section VI – Maintenance Agreement

Maintenance Agreement	Complete, sign and date the maintenance agreement. The maintenance agreement must be signed by an individual with signature authority, preferably the authorized agent.	<input type="checkbox"/>
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Other Required Documentation

Go to www.floridadisaster.org/dem/mitigation/hazard-mitigation-grant-program/ for additional documents

1. Maps	All maps must be included with the application.	<input type="checkbox"/>
2. FFATA Form	During contracting with the state, complete, sign and date the FFATA Project File Form. Instructions are provided for your convenience in the document provided. This is not required at the time of application submittal.	<input type="checkbox"/>
3. SFHA Acknowledgement of Conditions	Required for all projects in the Special Flood Hazard Area. Read and sign the SFHA Acknowledgement of Conditions document. This form must be notarized, signed by the local jurisdiction and the property owner.	<input type="checkbox"/>
4. Pre-award Cost Form	If pre-award costs are being requested with your project, be sure to identify all pre-award costs in the application budget per instructions. The pre-award cost form must be completed and submitted with your application.	<input type="checkbox"/>

5. Request for Public Assistance Form	Applicable if no FIPS number is assigned to applicant/recipient.	<input type="checkbox"/>
6. Model Statement of Assurances for Property Acquisition Projects	For Acquisition projects only.	<input checked="" type="checkbox"/>
7. Declaration and Release	For Acquisition projects only. Must be signed by all persons whose names are on the property deed.	<input checked="" type="checkbox"/>
8. Notice of Voluntary Interest	For Acquisition projects only. Two forms are available for your convenience. Use the form that is most appropriate to your situation. Must be signed by all persons whose names are on the property deed.	<input checked="" type="checkbox"/>
9. Statement of Voluntary Participation for Acquisition of Property for Purpose of Open Space	For Acquisition projects only. Must be signed by all persons whose names are on the property deed.	<input checked="" type="checkbox"/>
10. Worksheets	The appropriate worksheet(s) must be completed and submitted with the application. a. Flood Control – Drainage Improvement b. Generator c. Tornado Safe Room d. Hurricane Safe Room e. Wind Retrofit f. Wildfire g. Drought	<input checked="" type="checkbox"/>

*Submit **1 original (signed) and 1 full copy** of the entire application and backup documentation. Include a full copy of the submittal and all documentation on CD or thumb drive.

Attachment Index

Use the following template to list any supporting documentation that is **included on the CD or flashdrive**. Clearly and concisely label each attachment on this form to correspond with the file name on the CD or flashdrive. In the first column list which section and item (from the HMGP application) the attachment refers to. *Example: Section 2, Item 1.* **If any required documentation is not included on the CD or flashdrive, the application will be considered incomplete and will not be considered for possible funding.**

Section # & Item	Attached Document Name
1	
2	
3	
4	
5	
6	
7	
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<https://www.floridadisaster.org/dem/mitigation/hazard-mitigation-grant-program/>

- 1) HMGP – federally funded – application, selection, LMSWG is administered by FDEM according to 27-P-22 FL Administrative Code
- 2) HMGP Application and Resources
 - a. Application
 - b. Project Worksheets (required per project type – Engineering)
 - c. Acquisition Projects – forms required to be submitted
- 3) HMGP Post-Award Resources
 - a. FDEM and FEMA documents and links
- 4) Hurricane Ian
 - a. NOFA
 - b. State-wide Webinar Video – if you didn't attend
 - c. Webinar chat and Q&A Log
 - d. State-wide slides

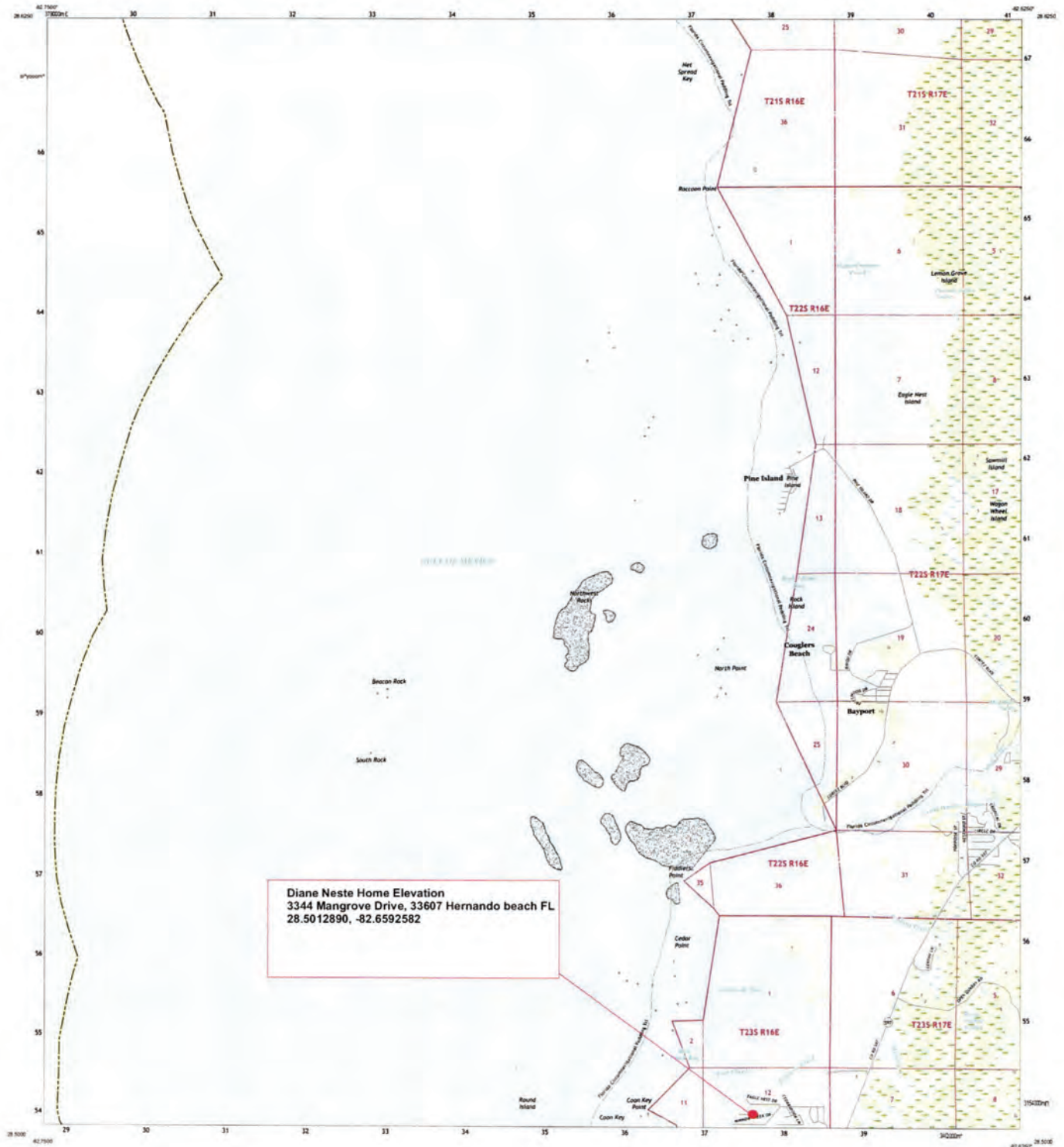
Now I would like to go directly to the Application to review the major Programmatic pitfalls we encounter and provide you further guidance. If you brought you application, you could follow along and add your notes for clarification.



U.S. DEPARTMENT OF THE INTERIOR
U.S. GEOLOGICAL SURVEY



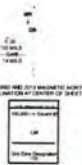
BAYPORT QUADRANGLE
FLORIDA - HERNANDO COUNTY
7.5-MINUTE SERIES



Diane Neste Home Elevation
3344 Mangrove Drive, 33607 Hernando beach FL
28.5012890, -82.6592582

Produced by the United States Geological Survey
North American Datum of 1983 (NAD83)
North American Datum of 1983 (NAD83) Projection and
1000-meter grid interval (NAD83 datum), Zone 18
This map is not a legal document. Boundaries may be
generated for this map using other geospatial
information that may not be shown. Other information varies
among various scales.

Map	U.S. Census	2010
Map	U.S. Census	2000
Map	U.S. Census	1990
Map	National Hydrography Dataset	2002
Map	National Hydrography Dataset	2002
Map	National Hydrography Dataset	2002
Map	National Hydrography Dataset	2002
Map	National Hydrography Dataset	2002
Map	National Hydrography Dataset	2002
Map	National Hydrography Dataset	2002



ROAD CLASSIFICATION

Equipment	Local Road
Secondary Hwy	Local Road
Trunk	400
Interstate	400
State Route	400
State Route	400
State Route	400

BAYPORT, FL
2021



National Flood Hazard Layer FIRMette



82°39'50"W 28°29'48"N

COASTAL FLOODPLAIN

Zone VE

Jeffery Stantz Home Elevation
3362 Gulfview Drive, 34607 Hernando Beach FL
28.4923165, -82.6586898

T23S R16E S12 (EL 13 Feet)

HERNANDO COUNTY
 UNINCORPORATED AREAS
 120110

COASTAL FLOODPLAIN
 Zone AE
 (EL 12 Feet)

COASTAL FLOODPLAIN
 Zone VE
 (EL 15 Feet)

COASTAL FLOODPLAIN
 Zone VE
 (EL 14 Feet)

12053C0282E
 eff. 1/15/2021

12053C0281E
 eff. 1/15/2021

T23S R16E S13

COASTAL FLOODPLAIN
 Zone VE
 (EL 14 Feet)

0 250 500 1,000 1,500 2,000 Feet 1:6,000

82°39'13"W 28°29'16"N

Legend

SEE FIS REPORT FOR DETAILED LEGEND AND INDEX MAP FOR FIRM PANEL LAYOUT

- SPECIAL FLOOD HAZARD AREAS**
 - Without Base Flood Elevation (BFE)
Zone A, V, A99
 - With BFE or Depth Zone AE, AO, AH, VE, AR
 - Regulatory Floodway
- OTHER AREAS OF FLOOD HAZARD**
 - 0.2% Annual Chance Flood Hazard, Area of 1% annual chance flood with average depth less than one foot or with drainage areas of less than one square mile Zone J
 - Future Conditions 1% Annual Chance Flood Hazard Zone X
 - Area with Reduced Flood Risk due to Levee. See Notes, Zone X
 - Area with Flood Risk due to Levee Zone D
- OTHER AREAS**
 - NO SCREEN Area of Minimal Flood Hazard Zone X
 - Effective LOMRs
 - Area of Undetermined Flood Hazard Zone
- GENERAL STRUCTURES**
 - Channel, Culvert, or Storm Sewer
 - Levee, Dike, or Floodwall
- OTHER FEATURES**
 - Cross Sections with 1% Annual Chance Water Surface Elevation
 - Cross Sections with 1% Annual Chance Water Surface Elevation
 - Coastal Transect
 - Base Flood Elevation Line (BFE)
 - Limit of Study
 - Jurisdiction Boundary
 - Coastal Transect Baseline
 - Profile Baseline
 - Hydrographic Feature
- MAP PANELS**
 - Digital Data Available
 - No Digital Data Available
 - Unmapped



This map complies with FEMA's standards for the use of digital flood maps if it is not void as described below. The basemap shown complies with FEMA's basemap accuracy standards

The flood hazard information is derived directly from the authoritative NFHL web services provided by FEMA. This map was exported on 5/24/2024 at 3:27 PM and does not reflect changes or amendments subsequent to this date and time. The NFHL and effective information may change or become superseded by new data over time.

This map image is void if the one or more of the following map elements do not appear: basemap imagery, flood zone labels, legend, scale bar, map creation date, community identifiers, FIRM panel number, and FIRM effective date. Map images for unmapped and unmodernized areas cannot be used for regulatory purposes.



Jeffery Stantz Home Elevation
3362 Gulfview Drive, 34607 Hernando Beach FL
28.4923165, -82.6586898



May 24, 2024

Wetlands

- | | | | | | |
|---|--------------------------------|---|-----------------------------------|---|----------|
|  | Estuarine and Marine Deepwater |  | Freshwater Emergent Wetland |  | Lake |
|  | Estuarine and Marine Wetland |  | Freshwater Forested/Shrub Wetland |  | Other |
| | |  | Freshwater Pond |  | Riverine |

This map is for general reference only. The US Fish and Wildlife Service is not responsible for the accuracy or currentness of the base data shown on this map. All wetlands related data should be used in accordance with the layer metadata found on the Wetlands Mapper web site.

QuickFacts
Hernando County, Florida

QuickFacts provides statistics for all states and counties. Also for cities and towns with a *population of 5,000 or more*.

All Topics



Hernando County,
 Florida

Persons in poverty, percent ▲ 12.1%

PEOPLE

Population

Population estimates, July 1, 2023, (V2023)	▲ 212,807
Population estimates base, April 1, 2020, (V2023)	▲ 194,508
Population, percent change - April 1, 2020 (estimates base) to July 1, 2023, (V2023)	▲ 9.4%
Population, Census, April 1, 2020	194,515
Population, Census, April 1, 2010	172,778

Age and Sex

Persons under 5 years, percent	▲ 4.3%
Persons under 18 years, percent	▲ 18.4%
Persons 65 years and over, percent	▲ 26.4%
Female persons, percent	▲ 51.4%

Race and Hispanic Origin

White alone, percent	▲ 88.6%
Black or African American alone, percent (a)	▲ 6.7%
American Indian and Alaska Native alone, percent (a)	▲ 0.6%
Asian alone, percent (a)	▲ 1.6%
Native Hawaiian and Other Pacific Islander alone, percent (a)	▲ 0.1%
Two or More Races, percent	▲ 2.5%
Hispanic or Latino, percent (b)	▲ 17.1%
White alone, not Hispanic or Latino, percent	▲ 73.5%

Population Characteristics

Veterans, 2018-2022	19,459
Foreign born persons, percent, 2018-2022	7.7%

Housing

Housing Units, July 1, 2023, (V2023)	94,200
Owner-occupied housing unit rate, 2018-2022	80.1%
Median value of owner-occupied housing units, 2018-2022	\$214,700
Median selected monthly owner costs -with a mortgage, 2018-2022	\$1,352
Median selected monthly owner costs -without a mortgage, 2018-2022	\$407
Median gross rent, 2018-2022	\$1,155
Building Permits, 2023	2,030

Families & Living Arrangements

Households, 2018-2022	79,169
Persons per household, 2018-2022	2.46
Living in same house 1 year ago, percent of persons age 1 year+, 2018-2022	86.9%
Language other than English spoken at home, percent of persons age 5 years+, 2018-2022	12.1%

Computer and Internet Use

Households with a computer, percent, 2018-2022	95.2%
Households with a broadband Internet subscription, percent, 2018-2022	89.9%

Education

High school graduate or higher, percent of persons age 25 years+, 2018-2022	89.4%
Bachelor's degree or higher, percent of persons age 25 years+, 2018-2022	20.0%

Health

With a disability, under age 65 years, percent, 2018-2022	13.0%
Persons without health insurance, under age 65 years, percent	▲ 15.7%

Economy

In civilian labor force, total, percent of population age 16 years+, 2018-2022	50.8%
In civilian labor force, female, percent of population age 16 years+, 2018-2022	47.5%
Total accommodation and food services sales, 2017 (\$1,000) (c)	254,562
Total health care and social assistance receipts/revenue, 2017 (\$1,000) (c)	1,247,910
Total transportation and warehousing receipts/revenue, 2017 (\$1,000) (c)	64,441
Total retail sales, 2017 (\$1,000) (c)	2,036,511
Total retail sales per capita, 2017 (c)	\$10,896

Transportation

Mean travel time to work (minutes), workers age 16 years+, 2018-2022	29.4
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Income & Poverty

Median household income (in 2022 dollars), 2018-2022	\$59,202
Per capita income in past 12 months (in 2022 dollars), 2018-2022	\$31,516

Persons in poverty, percent ▲ 12.1%

BUSINESSES**Businesses**


Total employer establishments, 2021	3,660
Total employment, 2021	37,330
Total annual payroll, 2021 (\$1,000)	1,490,759
Total employment, percent change, 2020-2021	-1.2%
Total nonemployer establishments, 2021	16,081
All employer firms, Reference year 2017	2,694
Men-owned employer firms, Reference year 2017	1,457
Women-owned employer firms, Reference year 2017	509
Minority-owned employer firms, Reference year 2017	328
Nonminority-owned employer firms, Reference year 2017	2,060
Veteran-owned employer firms, Reference year 2017	5
Nonveteran-owned employer firms, Reference year 2017	2,149


GEOGRAPHY**Geography**

Population per square mile, 2020	411.3
Population per square mile, 2010	365.6
Land area in square miles, 2020	472.97
Land area in square miles, 2010	472.54
FIPS Code	12053

[About datasets used in this table](#)

Value Notes

 Methodology differences may exist between data sources, and so estimates from different sources are not comparable.

Some estimates presented here come from sample data, and thus have sampling errors that may render some apparent differences between geographies statistically indistinguishable. Click the Quick Info  icon to the row in TABLE view to learn about sampling error.

The vintage year (e.g., V2023) refers to the final year of the series (2020 thru 2023). Different vintage years of estimates are not comparable.

Users should exercise caution when comparing 2018-2022 ACS 5-year estimates to other ACS estimates. For more information, please visit the [2022 5-year ACS Comparison Guidance](#) page.

Fact Notes

- (a) Includes persons reporting only one race
- (b) Hispanics may be of any race, so also are included in applicable race categories
- (c) Economic Census - Puerto Rico data are not comparable to U.S. Economic Census data

Value Flags

- D** Suppressed to avoid disclosure of confidential information
- F** Fewer than 25 firms
- FN** Footnote on this item in place of data
- NA** Not available
- S** Suppressed, does not meet publication standards
- X** Not applicable
- Z** Value greater than zero but less than half unit of measure shown
- Either no or too few sample observations were available to compute an estimate, or a ratio of medians cannot be calculated because one or both of the median estimates falls in the lowest or upper in open ended distribution.
- N** Data for this geographic area cannot be displayed because the number of sample cases is too small.

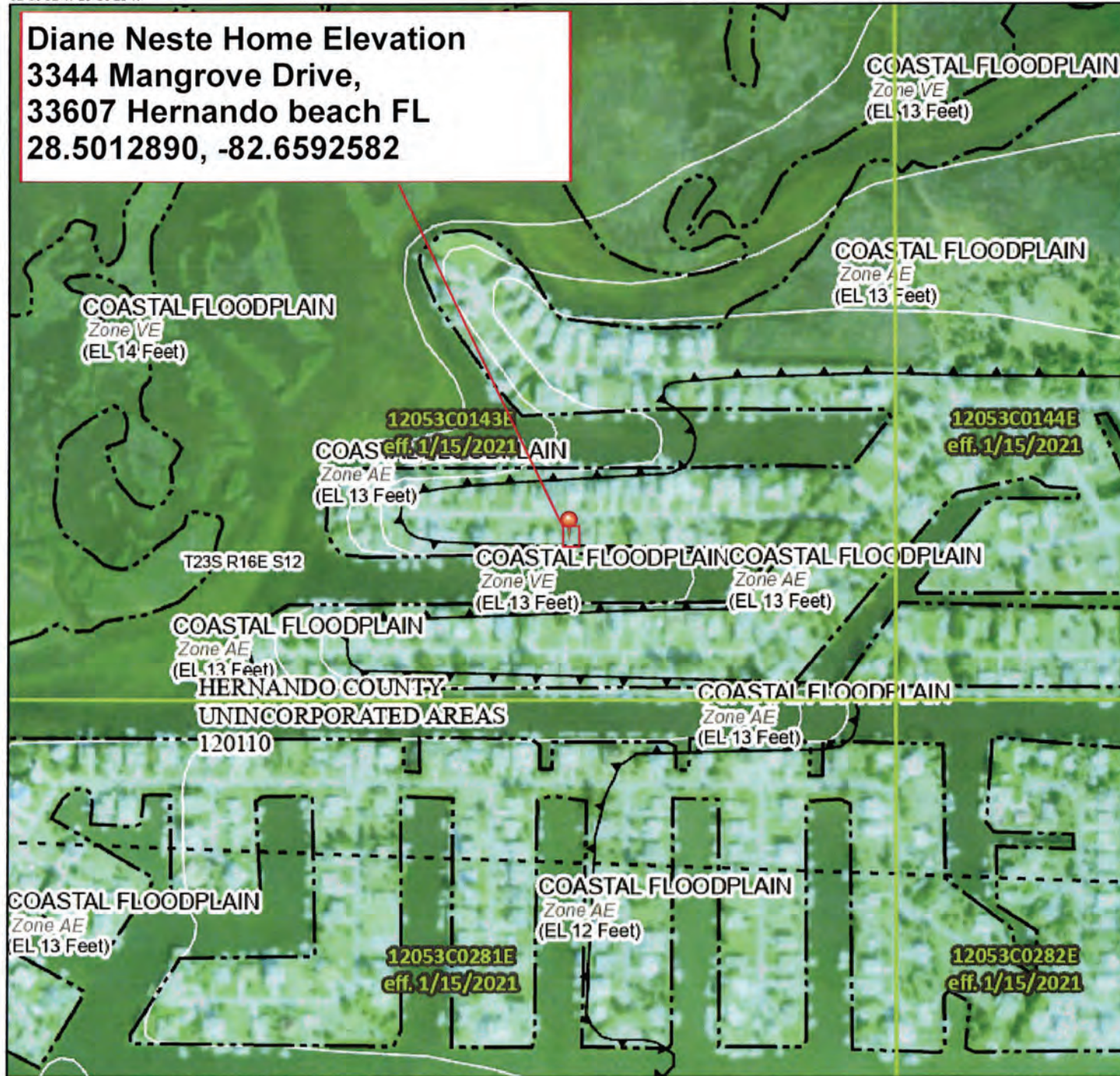
QuickFacts data are derived from: Population Estimates, American Community Survey, Census of Population and Housing, Current Population Survey, Small Area Health Insurance Estimates, Small Area Income and Pov Estimates, State and County Housing Unit Estimates, County Business Patterns, Nonemployer Statistics, Economic Census, Survey of Business Owners, Building Permits.

National Flood Hazard Layer FIRMette



82°39'52"W 28°30'21"N

Diane Neste Home Elevation
3344 Mangrove Drive,
33607 Hernando beach FL
28.5012890, -82.6592582



82°39'15"W 28°29'49"N

Legend

SEE FIS REPORT FOR DETAILED LEGEND AND INDEX MAP FOR FIRM PANEL LAYOUT

- SPECIAL FLOOD HAZARD AREAS**
 - Without Base Flood Elevation (BFE) Zone A, V, A99
 - With BFE or Depth Zone AE, AO, AH, VE, AR
 - Regulatory Floodway
 - OTHER AREAS OF FLOOD HAZARD**
 - 0.2% Annual Chance Flood Hazard, Area of 1% annual chance flood with average depth less than one foot or with drainage areas of less than one square mile Zone X
 - Future Conditions 1% Annual Chance Flood Hazard Zone X
 - Area with Reduced Flood Risk due to Levee. See Notes. Zone X
 - Area with Flood Risk due to Levee Zone D
 - OTHER AREAS**
 - NO SCREEN Area of Minimal Flood Hazard Zone X
 - Effective LOMRs
 - Area of Undetermined Flood Hazard Zone
 - GENERAL STRUCTURES**
 - Channel, Culvert, or Storm Sewer
 - Levee, Dike, or Floodwall
 - OTHER FEATURES**
 - 20.2 Cross Sections with 1% Annual Chance Water Surface Elevation
 - 17.5 Coastal Transect
 - Base Flood Elevation Line (BFE)
 - Limit of Study
 - Jurisdiction Boundary
 - Coastal Transect Baseline
 - Profile Baseline
 - Hydrographic Feature
 - MAP PANELS**
 - Digital Data Available
 - No Digital Data Available
 - Unmapped
- The pin displayed on the map is an approximate point selected by the user and does not represent an authoritative property location.

This map complies with FEMA's standards for the use of digital flood maps if it is not void as described below. The basemap shown complies with FEMA's basemap accuracy standards

The flood hazard information is derived directly from the authoritative NFHL web services provided by FEMA. This map was exported on 5/14/2024 at 8:25 AM and does not reflect changes or amendments subsequent to this date and time. The NFHL and effective information may change or become superseded by new data over time.

This map image is void if the one or more of the following map elements do not appear: basemap imagery, flood zone labels, legend, scale bar, map creation date, community identifiers, FIRM panel number, and FIRM effective date. Map images for unmapped and unmodernized areas cannot be used for regulatory purposes.

Diane Neste Home Elevation
3344 Mangrove Drive, 33607 Hernando beach FL
28.5012890, -82.6592582



An aerial photograph of a residential neighborhood. A red rectangular box highlights a house with a dark roof and a white garage. A red arrow points from the text box to this house. The surrounding area includes other houses, green lawns, and a road.

Jeffery Stantz Home Elevation
3362 Gulfview Drive,
34607 Hernando Beach FL
28.4923165, -82.6586898