

North Carolina Emergency Management Grant Application

Completed form, signed by each owner listed on the tax card, is required for Hazard Mitigation Grant Program application. Omitted or incorrect information may delay processing application or deem application ineligible for consideration.

Section 1: Property Site Inventory (Part A and B)

Part A. Property Owner and Property Information:

1. Address of structure being considered for mitigation ("mitigated structure"):

Street (number and name): _____

City: _____ State: _____ Zip code: _____ County: _____

2. Type of mitigation assistance being requested for the above property:

(1) Acquisition (land parcel and structures will be bought and turned to green space)

(2) Elevation (house will be raised)

If your preferred type of mitigation is not available, would you consider an alternative type of mitigation?

Yes No

If yes, please select alternate mitigation type:

(1) Acquisition

(2) Elevation

3. Structure owner(s) all persons listed on tax record, required. Use additional forms to include additional owners, if necessary.

Name(s): (1) _____ (2) _____

Phone: (1) _____ (2) _____

Email: _____ Preferred Contact Method: Phone Email

Are land owners different from structure owners? Yes No

4. Land owner(s) all persons listed on tax record, if different than structure owner(s), listed above.

Name(s): (1) _____ (2) _____

Phone: (1) _____ (2) _____

Email: _____ Preferred Contact Method: Phone Email

5. Do any of the current residents require special access due to a disability? Yes No

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6. Is the structure the primary residence for at least one owner(s)? Yes No
("Owner" requires that the individual's name is on tax card.)

7. Is the property associated with a homeowners Association? Yes No

8. Structure type:

1-story house w/o basement

1-story house with basement

2-story house w/o basement

2-story house with basement

Split-level house with basement

Split-level house w/o basement

Mobile home

Duplex

Apartment

Other: _____

9. If mobile home, is it titled by the DMV? Yes No N/A (not a mobile home)

If yes, please provide details: VIN: _____ Plate: _____ State: _____

10. Construction type:

Wood Frame

Other: _____

11. Foundation type:

Slab on grade

Concrete

Crawl space with ductwork

Concrete block

Brick

Crawl space w/o ductwork

Piers / pilings

Basement

Other: _____

12. **Wastewater:** Central Sewer Septic System Other: _____

13. **Heating:** Electric Oil Gas Solar Other: _____

14. Are there underground storage tanks on the property? Yes No

If yes, please explain tank usage / size in gallons:

15. Structure Details / Land Value:

Year structure built: _____ Value of structure: _____ Value of land: _____

Total square footage of structure: _____ Heated square footage of structure: _____

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- 16.** Are there other structures on the land being acquired? Yes No N/A (elevation)
(Such as deck, garage, carport, shed, barn, kennel, pool, etc.)

If yes, please provide details in **Table 1**, for additional structures on land.

Table 1

	Ancillary structure (deck, garage, carport, shed, barn, kennel, pool, dock)	Size Example: 20'L x 16'W x 10'H	Date of construction	Value
(1)				
(2)				
(3)				
(4)				
(5)				

- 17.** Is there more than one residential structure on the parcel being acquired? Yes No N/A (elevation)

If yes, please provide address in **Table 2**, for additional residential structure on parcel.

- 18.** Is there more than one parcel on the deed for the structure? Yes No N/A (elevation)

If yes, please provide the address in **Table 2**, for additional parcels on 1 deed. This parcel will also be acquired.

- 19.** Are there adjacent properties (same owner) to be acquired? Yes No N/A (elevation)

If yes, please provide details in **Table 2**, adjacent properties to be acquired.

Table 2

	Enter the address of the additional residential address, or the address of the secondary parcel, or the address of adjacent property	Enter type of adjacent property
(1)		
(2)		
(3)		

- 20.** Has the mitigated structure ever been used as rental property? Yes: Residential Rental Vacation Rental

No:

- 21.** Is the structure **currently** occupied? Yes, see **Table 3** No, it is vacant

If yes, please provide names and relationships of current occupants in **Table 3**.

Table 3

Name	Relationship	Reside in primary or secondary structure?

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Part B. Mitigated Structure: Flood Damage or Flood History (if applicable):

- 22.** Has the mitigated structure been deemed substantially damaged by a government official or professional inspection? *Must provide "substantial loss" determination letter.* Yes No
- 23.** Has this structure experienced damage or loss due to environmental flooding or disaster? Yes No
- 24.** For this structure, did you have flood insurance, at the time of loss? Yes No
- a. Flood insurance agent / company: _____
- b. Flood insurance policy number: _____
- 25.** Structure use at time of loss:
- | | |
|-------------------------------------|--|
| Owner occupied as primary residence | Owner occupied as primary residence and business use |
| Owner use as secondary residence | Owner occupied as secondary residence and business use |
| Rental property | Vacation rental |
| House of worship | Business use-only |
| Other: _____ | |
- 26.** Have you made a flood insurance claim for Increased Cost of Compliance coverage? Yes No
- 27.** For this structure, how many flood insurance claims have you filed, in the past 10 years? _____
- 28.** Have you applied for assistance in previous acquisition or elevation projects? Yes No
- If yes, please provide (a) program (b) type of assistance requested.
- (a) _____
- (b) _____
- 29.** For this structure, have you applied for disaster assistance in the past ten (10) years? Yes No
- If yes, please provide FEMA registration #: _____

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30. Please list damage to the structure from external or environmental causes, including damages resulting from presidentially declared disasters and other causes (i.e. water-level rise due to regional construction) in **Table 4**.

Table 4

Date (MM/YYYY)	Storm name (if applicable)	Description of damages	Cost of damages (1 total amount per event)	Amount reimbursed from <u>flood</u> insurance (1 total amount per event)
(1)				
(2)				
(3)				

31. Who was occupying the structure(s) **at time of loss**?

See **Table 5**

Vacant

If occupied **at time of loss**, please provide names and relationships of occupants in **Table 5**.

Table 5

Name	Relationship

Note: only structure / land owners, and individuals with power of attorney for the owner, are eligible to apply.

If the person(s) signing this application are not the deed holder of the above structure / land, please state your interest in the property (i.e. "power of attorney")

Failure to furnish all requested information on this form will result in a delay of project approval or removal of property from consideration for hazard mitigation funding.

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Section 2: Voluntary Interest in Hazard Mitigation Grant Program

The Hazard Mitigation Program is voluntary. Homeowners interested in this program must be informed in writing that participation in the program is voluntary and that the sub-applicant (government) will not use its eminent domain authority to acquire their property for the project purposes if negotiations fail. It is important to articulate that you are free to withdraw (under no penalty or obligation) at any point if the offer to purchase your property is not sufficient. All property owners must review and sign below.

This project for open space acquisition is voluntary and neither the sub-applicant nor the State will use its eminent domain authority to acquire the property for open space purposes should negotiations fail and the property owner chooses not to participate.

Property Owner 1 Name: _____

Property Owner 1 Signature: _____ Date: _____

Property Owner 2 Name: _____

Property Owner 2 Signature: _____ Date: _____

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Section 3: Duplication of Benefits

The Federal Emergency Management Agency has adopted a policy that prohibits duplication of benefits in the Hazard Mitigation Assistance Program that includes Flood Mitigation Assistance grants. The policy was developed in response to federal regulations that dictate the use of the primary funds used to mitigate property. The Federal Emergency Management Agency (FEMA) provides the following specific instructions in the Hazard Mitigation Assistance Program Guidelines for mitigation projects.

In the administration of Flood Mitigation Assistance Program (FMA) grants, FEMA and the grantee should avoid any duplication of benefits with other forms of assistance. FEMA's policy on duplication of benefits for individuals and families is mandated by Section 312 of the Stafford Act and is set forth in 44 CFR 206.191. This Section of the FEMA regulations delineates a delivery sequence establishing the order in which the disaster relief agencies and organizations assist individuals and families. Programs listed later in the sequence are responsible for ensuring that they do not duplicate assistance which should be provided by a program listed earlier on the list (the program with primary responsibility).

In the case of flood-damaged property programs (Section 1362, Section 404, etc.), they are not listed in the delivery sequence, and therefore are positioned after the eight listed programs. This means that all eight programs listed in the sequence at 44 CFR 206.191 (d) are "primary programs" in relation to mitigation grant programs. The Flood Mitigation Assistance program is required to ensure that it does not duplicate assistance which should be provided by any of the eight primary assistance programs.

Certification of Funds Used

Receipt of or pending receipt of the following benefit amounts must be disclosed to the State of North Carolina.

1. Small Business Administration (SBA) Loans - a property owner who has an SBA loan on the property being acquired will either be required to repay the loan to SBA, or roll it over to a new property at closing.

YesNo
2. Flood Insurance for structure repairs - flood insurance payment that a property owner has received, or is eligible to receive, intended to cover structural repairs to the property being acquired will be deducted from the purchase price of the property being acquired. If flood insurance funds have been reinvested into repairs to the property, this amount will not be deducted. Proof of reinvestment can be supplied through receipts for materials and/or labor, or through on-site verification.
Amount reinvested: _____
3. FEMA Individual Family Grant and Emergency Minimal Repair Grant (EMR) - that portion of an IFG grant that a property owner has received or is eligible to receive intended to cover structural repairs to the property being acquired will be deducted from the purchase price of the property. Additionally, grants received from FEMA as part of Temporary Housing Assistance Program to quickly repair or restore owner-occupied primary residences to habitable and safe condition will be deducted from the purchase price of the property. If the funds have been reinvested into repairs to the property, this amount will not be deducted. Proof of reinvestment can be supplied through receipts for materials and/or labor, or through on-site verification.
Amount received: _____
4. FEMA Disaster Housing - FEMA Disaster Housing money received by the property owner will not be deducted if the property owner has used the grant for housing related expenses. These can include: transient accommodations while an existing home is being elevated or relocated; combining it with other funds to make more substantial home repairs; minor home repairs made to make a home more livable prior to a buyout offer; down payments toward the purchase of a new home; moving expenses; closing costs; insurance; and deposits.
Amount received: _____
5. I have also applied for funds through:

Individual Assistance

SBA

NCORR

Other: _____

CDBG

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I/we (signed below) hereby certify that the SBA Loans, Flood Insurance for Structure Repairs, FEMA Individual and Family Grant, Emergency Minimal Repair Grant (EMR) and FEMA Disaster Housing benefits defined above have been accurately reported and that the amounts not used for the purposes identified above have been fully disclosed.

(1) Homeowner 1 Signature: _____ Date: _____
(2) Homeowner 2 Signature: _____ Date: _____

PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for this form is estimated to average 1 hour per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and submitting the form. This collection of information is voluntary. You are not required to respond to this collection of information unless a valid OMB control number is displayed in the upper right corner of this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing the burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 1800 South Bell Street, Arlington VA 20598- 3005, Paperwork Reduction Project (1660-0103). NOTE: DO NOT SEND YOUR COMPLETED FORM TO THIS ADDRESS

Privacy Act Statement

Authority: Sections 203 and 404 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, as amended, 42 U.S.C. § 5133 and 42 U.S.C. § 5170c; § 1366 of the National Flood Insurance Act, (NFIA) as amended, 42 § U.S.C. 4104c; § 1323 of the NFIA, 42 U.S.C. § 4030; and § 1361A of the NFIA, 42 U.S.C. § 4102a.

Purpose: The information is being collected for the purpose of formalizing the purchase offer valuation of a property subject to mitigation and to ensure that recipients of Hazard Mitigation Assistance funds for the acquisition and demolition of these properties understand that their participation is strictly voluntary.

Routine Uses: The information on this form may be disclosed as generally permitted under 5 U.S.C. § 552a (b) of the Privacy Act of 1974, as amended.

Disclosure: The disclosure of information on this form is voluntary; however, failure to provide the information requested may delay or prevent FEMA from being able to provide Hazard Mitigation Assistance for the acquisition and demolition of the structure for the purposes of mitigation. The signed voluntary participation statement will be forwarded to the State/ applicant and the paper form will be contained in the grant application.

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Section 4: Declaration and Release

DEPARTMENT OF HOMELAND SECURITY
Federal Emergency Management Agency
DECLARATION AND RELEASE

O.M.B No. 1660-0002
Expires August 21, 2022

PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for this data collection is estimated to average 2 minutes per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and submitting this form. This collection of information is required to obtain or retain benefits. You are not required to respond to this collection of information unless a valid OMB control number is displayed on this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing the burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 500 C Street, SW, Washington, DC 20472-3100, Paperwork Reduction Project (1660-0002) **NOTE: Do not send your completed form to this address.**

PRIVACY ACT STATEMENT

AUTHORITY: FEMA collects, uses, maintains, retrieves, and disseminates the records within this system under the authority of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (the Stafford Act), Pub. L. No. 93-288, as amended (42 U.S.C. §§ 5121-5207); 6 U.S.C. §§ 776-77, 795; the Debt Collection Improvement Act of 1996, 31 U.S.C. §§ 3325(d), 7701(c)(1); the Government Performance and Results Act, Pub. L. No. 103-62, as amended; Reorganization Plan No. 3 of 1978; Executive Order 13411, "Improving Assistance for Disaster Victims," August 29, 2006; and Executive Order 12862 "Setting Customer Service Standards," September 11, 2003, as described in this notice. **PRINCIPAL PURPOSE(S):** This information is being collected for the primary purpose of determining eligibility and administering financial assistance under a Presidentially-declared disaster. Additionally, information may be reviewed internally within FEMA for quality assurance purposes and used to assess FEMA's customer service to disaster assistance applicants. FEMA collects the social security number (SSN) to verify an applicant's identity and to prevent a duplication of benefits. **ROUTINE USE(S):** FEMA may share the personal information of U.S. citizens and lawful permanent residents contained in their disaster assistance files outside of FEMA as generally permitted under 5 U.S.C. § 552a(b) of the Privacy Act of 1974, as amended, including pursuant to routine uses published in DHS/FEMA-008 Disaster Recovery Assistance Files Notice of System of Records, 78 Fed. Reg. 25,282 (Apr.30, 2013) and upon written request, by agreement or as required by law. FEMA may share the personal information of non-citizens, as described in the following Privacy Impact Assessments: DHS/FEMA/PIA-012(a) Disaster Assistance Improvement Plain (DAIP) (Nov. 16, 2012); DHS/FEMA/PIA-027 National Emergency Management Information System - Individual Assistance (NEMIS-IA) Web-based and Client-based Modules (June 29, 2012); DHS/FEMA/PIA-015 Quality Assurance Recording System (Aug. 15, 2014). FEMA may share your personal information with federal, state, tribal, local agencies and voluntary organizations to enable individuals to receive additional disaster assistance, to prevent duplicating your benefits, or for FEMA to recover disaster funds received erroneously, spent inappropriately, or through fraud. **CONSEQUENCES OF FAILURE TO PROVIDE INFORMATION:** The disclosure of information, including the SSN, on this form is voluntary; however, failure to provide the information requested may delay or prevent the individual from receiving disaster assistance.

DECLARATION AND RELEASE

In order to be eligible to receive FEMA Disaster Assistance, a member of the household must be a citizen, non-citizen national or qualified alien of the United States. **Please read the form carefully, sign the sheet and return it to the Inspector, and show him/her a current form of photo identification.** Please feel free to consult with an attorney or other immigration expert if you have any questions.

I hereby declare, under penalty of perjury that (check one):

I am a citizen or non-citizen national of the United States.

I am a qualified alien of the United States.

I am the parent or guardian of a minor child who resides with me and who is a citizen, non-citizen national or qualified alien of the United States. Print full name and age of minor child:

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By my signature I certify that:

- * Only one application has been submitted for my household.
- * All information I have provided regarding my application for FEMA disaster assistance is true and correct to the best of my knowledge.
- * I will return any disaster aid money I received from FEMA or the State if I receive insurance or other money for the same loss, or if I do not use FEMA disaster aid money for the purpose for which it was intended.

I understand that, if I intentionally make false statements or conceal any information in an attempt to obtain disaster aid, it is a violation of federal and state laws, which carry severe criminal and civil penalties, including a fine up to \$250,000, imprisonment, or both (18 U.S.C. §§ 287, 1001, and 3571).

I understand that the information provided regarding my application for FEMA disaster assistance may be subject to sharing within the Department of Homeland Security (DHS) including, but not limited to, the Bureau of Immigration and Customs Enforcement.

I authorize FEMA to verify all information given by me about my property/place of residence, income, employment and dependents in order to determine my eligibility for disaster assistance; and

I authorize all custodians of records of my insurance, employer, any public or private entity, bank financial or credit data service to release information to FEMA and/or the State upon request.

NAME (print)	SIGNATURE	DATE OF BIRTH	DATE SIGNED
INSPECTOR ID #	FEMA APPLICATION #	DISASTER #	
ADDRESS OF DAMAGED PROPERTY	CITY	STATE	ZIP CODE

FEMA FORM 009-0-3

REPLACES ALL PREVIOUS EDITIONS

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Section 5: Acknowledgment of Conditions for Home Elevation

See below FEMA Form FF-206-FY-22-158 (2/23)

*Requires notarization

The following form is only for Home Elevation

The following form is only for Home Elevation

The following form is only for Home Elevation

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DEPARTMENT OF HOMELAND SECURITY
Federal Emergency Management Agency

**ACKNOWLEDGEMENT OF CONDITIONS FOR PROPERTIES
USING FEMA HAZARD MITIGATION ASSISTANCE**

PRIVACY ACT STATEMENT

Authority: Sections 203 and 404 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, as amended, 42 U.S.C. §§5133 and 5170c; and § 1366 of the National Flood Insurance Act, (NFIA) as amended, 42 § U.S.C. 4104c.

Purpose: This template is provided by FEMA for signature by property owners and local government officials participating in a mitigation project funded in part by Hazard Mitigation Assistance. The template communicates flood insurance requirements and floodplain management criteria.

Routine Uses: The information on this form may be disclosed as generally permitted under 5 U.S.C. § 552a(b) of the Privacy Act of 1974, as amended. This includes using this information as necessary and authorized by the routine uses published in DHS/FEMA-009 -Hazard Mitigation Disaster Public Assistance and Disaster Loan Programs System of Records System of Records Notice (79 Fed. Reg. 16,015, March 24, 2014), and upon written request, by agreement, or as required by law.

Disclosure: The disclosure of information on this form is voluntary; however, failure to provide the information requested may delay or prevent FEMA from being able to provide Hazard Mitigation Assistance.

INSTRUCTIONS

This template is provided by FEMA for signature by property owners and local government officials participating in a mitigation project funded in part by Hazard Mitigation Assistance.

For Pre-Disaster Mitigation (PDM), Building Resilient Infrastructure and Communities (BRIC), Flood Mitigation Assistance (FMA), the Hazard Mitigation Grant Program (HMGP), and HMGP Post Fire, these conditions apply when the property to be mitigated is located in a Special Flood Hazard Area (SFHA). For Flood Mitigation Assistance, these conditions apply regardless of whether the property is located in an SFHA.

Information in brackets [city/county] should be updated as needed. This document must be signed and submitted to FEMA by the Applicant (State, Tribe or Territory) prior to award. The template requires the signature of the property owner(s) and the local municipal official(s).

Property Owner: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Deed dated: _____, Recorded: _____

Tax map: _____, Block: _____, Parcel: _____

Base Flood Elevation at the site is _____ feet (NGVD).

Map Panel Number: _____, Effective Date: _____

Select one of the following "whereas" clauses appropriate for the grant awarded:

☐ WHEREAS, the Flood Mitigation Assistance (FMA) program, authorized by Section 1366 of the National Flood Insurance Act of 1968 (42 U.S.C. § 4104c), provides federal financial assistance for planning and carrying out activities designed to reduce the risk of flood damage to structures insured under the National Flood Insurance Program;

☐ WHEREAS, the Hazard Mitigation Grant Program (HMGP), authorized by Section 404 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, ("Stafford Act") (42 U.S.C. § 5170c), including the HMGP Post Fire program authorized by Sections 404 and 420 of the Stafford Act (42 U.S.C. §§ 5170c and 5187), provides federal financial assistance, in any area affected by a major disaster or for which assistance was provided under Section 420, for hazard mitigation measures;

☐ WHEREAS, the Building Resilient Infrastructure and Communities (BRIC) program, authorized by Section 203 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. § 5133), provides federal financial assistance for the implementation of pre-disaster hazard mitigation measures;

☐ WHEREAS, the Pre-Disaster Mitigation (PDM) program, authorized by Section 203 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. § 5133), provides federal financial assistance for the implementation of pre-disaster hazard mitigation measures;

NOW THEREFORE, the Property Owner has been informed of and accepts the following conditions:

That the Property Owner has insured all structures that will not be demolished or relocated out of the SFHA for the above mentioned property to an amount at least equal to the project cost or to the maximum limit of coverage made available with respect to the particular property, whichever is less, through the National Flood Insurance Program (NFIP), as authorized by 42 U.S.C. §4001 et seq., as long as the Property Owner holds title to the property as required by federal law, regulations, and policy (for HMGP, HMGP Post Fire, and BRIC, see 42 U.S.C. §4012a; for FMA, see 44 C.F.R. §77.6(a)(2)).

That the Property Owner will maintain all structures on the above-mentioned property in accordance with the flood plain management criteria set forth in 44 C.F.R. §60.3 and City/County Ordinance as long as the Property Owner holds title to the property. For a complete, detailed list of these criteria, see _____ County
_____ County Flood Prevention Ordinance attached to this document.

The above conditions are binding for the life of the property. To provide notice to subsequent purchasers of these conditions, the Property Owner(s) agrees that the _____ County will legally record with the county or appropriate jurisdiction's land records a notice that includes the name of the current property owner(s) (including book/page reference to record of current title, if available), a legal description of the property, and the following notice of flood insurance requirements:

"This property has received federal Hazard Mitigation Assistance. Federal law, regulations, and policy require that flood insurance coverage on this property must be maintained during the life of the property regardless of transfer of ownership of such property (for HMGP, HMGP Post Fire, and BRIC, see 42 U.S.C. §4012a; for FMA, see 44 CFR 77.6(a)(2)). Failure to maintain flood insurance coverage will result in the property owner being ineligible for future Hazard Mitigation Assistance awards. The Property Owner is also required to maintain this property in accordance with the flood plain management criteria of Title 44 of the Code of Federal Regulations § 60.3 and any city/county ordinance."

3. If the above conditions are not met, FEMA may enforce the terms of the award by taking any measures it deems appropriate in accordance with 2 CFR § 200.339 and any other applicable FEMA authorities, including recouping the amount of the award from _____ County.
4. This Agreement shall be binding upon the respective parties' heirs, successors, personal representatives, and assignees.

THE _____, a _____ municipal corporation

BY: _____ of _____ County

5. _____
Official Name, Title

Property Owner Signature (1)

Property Owner Signature (2)

BY

WITNESSED BY:

Witness

Notary Public

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Section 6: Right of Entry (ROE)

Completion of the following form is not a requirement for the HMGP application

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	State of North Carolina Hazard Mitigation Grant Application for FEMA-4827-DR/EM-24 and FEMA-4837-DR-24 Address: _____ Parcel Tax ID Number: _____ Federal/State/Tribal Landmark [Y/N]: ____
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**RIGHT OF ENTRY (“ROE”) ONTO PRIVATE PROPERTY FOR HAZARD MITIGATION GRANT
PROGRAM PROPERTY PHOTOGRAPHY (FEMA-4827- DR/EM-24 and FEMA-4837- DR-24)**

Ownership Interest’s Grant of Right of Entry for Hazard Mitigation Grant Program Activities

The undersigned hereby certifies he/she/they/is/are (check):

_____ Property Owner(s) with authority to grant access to the property at
(Address) _____.

_____ The authorized agent of the Property Owner(s) at above address.

The Property Owner(s)/agent authorizes the County of _____, the State of North Carolina and the United States of America, their respective agents, successors and assigns, contractors and subcontractors (collectively, the “Governments/Contractors”) to have the right of access and to enter the property above specified for purposes of photographing properties for acquisition, elevation, and mitigation reconstruction project applications under the Hazard Mitigation Grant Program authorized through the major disaster declarations for FEMA-4827- DR/EM-24 and FEMA-4837- DR-24.

Governments/Contractors will perform the following work:

1. Photograph properties for acquisition, elevation, and mitigation reconstruction Hazard Mitigation Grant Program project applications.

A photograph of each side of the structure is required for structures that are still on the property. Property Owner(s) will unlock any gates restricting property access and secure all loose animals on the property on the day the visit is planned. The person(s) assigned to take photographs of the property will attempt to contact the Property Owner(s) via the phone number listed below at least one day in advance of the visit.

The Hazard Mitigation Grant Program is voluntary and signing this Right of Entry does not prohibit the Property Owner(s) from withdrawing from participation at any time during the process.

Government Not Obligated -- No Expense Except For Insurance Proceeds

The Property Owner(s)/agent understands that this Right of Entry does not obligate the Governments/Contractors to provide the Property Owner(s) with any type of Hazard Mitigation Grant Program assistance. Governments/Contractors will access the property under this ROE if the work has been determined necessary in accordance with Federal, State, Territorial, Tribal or local regulations. The Property Owner(s) will not be charged for the work conducted by Governments/Contractors.

Government Held Harmless

The Property Owner(s)/agent agrees to hold harmless the Governments/Contractors for any damage of any type whatsoever to the above described property or to personal property and fixtures situated thereon, or for bodily injury or death to persons on the property, and hereby releases, discharges and waives any and all actions, either legal or equitable, which the Property Owner(s) has, or ever might or may have, by reason of any action taken by Governments/Contractors to photograph the property.

Acknowledgment of Prohibition on Fraud, Intentional Misstatements

The Property Owner(s)/agent understands that an individual who fraudulently or willfully misstates any fact in connection with this agreement may be subject to penalties under state and federal law, including civil penalties, imprisonment for not more than five years, or both, as provided under 18 USC § 1001.

Property Owner(s)/Authorized Agent:

Name: _____

Signature: _____

Date: _____

Current Address: _____

Telephone Number: _____

Please use the space below to note any special access instructions for the property: