Hazard Mitigation Notice of Intent Form

2023

ARKANSAS DIVISION OF EMERGENCY MANAGEMENT

Applicant Name:	UEI:	
Address:	County:	
Point of Contact:	Phone:	
Email Address:	GPS Coord:	
Project Title:	NOI Date:	

MITIGATION PLAN REQUIREMENT			
Is the juris	diction covered by a cu	rrent FEMA approved Mitigation Plan?	Yes: No:
Name of th	ne plan:		Plan approval date:
Describe h	ow the proposed proje	ct relates to the plan:	
		SCOPE OF WORK	
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Provide a detailed description of the project: (Attach additional documentation if necessary) Explain how the project reduces hazard risk to the jurisdiction: Have there been previous damages/repairs related to this project?			
Year	Estimated Cost	Damages/R	epairs Description
List the specific area affected by the proposed project <i>(County/City/Subdivision/Street):</i> Number of individuals this project will protect: Does the project protect a critical facility? If yes, please explain:			

Please submit any preliminary drawings, site photos, H&H studies, Public Assistance worksheets, etc. that will support your scope of work.

Disclaimer: This is not an application and does not constitute funding approval by ADEM or FEMA. DO NOT begin project without prior written approval.

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Name/Title (print) Must have authority to commit funds.	Authorized Official Email Address		
Signature	Date		

applicant.

Has an NOI for this project previously been submitted to ADEM that went unfunded?	Yes	No	
Date NOI was submitted:			
Does the community participate in the National Flood Insurance Program (NFIP)?	Yes	No	
All information in this Notice of Intent is true and correct and the document has been duly appr	oved by the g	governing body of	the

	COST SHARE	
Total Cost Estimate:		
	Dollars	Percentage
Proposed State Share:		
Proposed Non-State Share:		

ADDITIONAL INFORMATION

COST ESTIMATE			
Item Name	Cost Estimate		
Total Cost Estimate:			

Please include all tasks necessary to implement this mitigation project, the duration for each task, and who will complete it. Description of Task Duration Work Completed By

WORK SCHEDULE