

**FEMA HAZARD MITIGATION ASSISTANCE GRANT PROGRAM  
(Non-Disaster Grants) Letter of Interest**

**SUBJECT:** FEMA Hazard Mitigation Assistance Grant Program (Non-Disaster HM Grants)

**TO:** State Hazard Mitigation Officer (SHMO)

Dear SHMO:

The purpose of this notice is to inform you of our interest in participating in the Hazard Mitigation Assistance Program for the federal fiscal year \_\_\_\_\_ (FFY).

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

**DATE:** \_\_\_\_\_ **County Hazard Mitigation Plan adoption** \_\_\_\_\_ (County EMA will have a Date)

**APPLICANT COMMUNITY:** \_\_\_\_\_

**COUNTY:** \_\_\_\_\_

**Applicant Agent form** (POC in Annual Updated Sam Account)

**NAME:** \_\_\_\_\_

**TITLE:** \_\_\_\_\_

**AGENCY:** (include UEI number) \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**TYPE OF PROGRAMS INTERESTED IN**

**Building Resilient Infrastructure and Communities (BRIC)**

**Flood Mitigation Assistance (FMA)**

**TYPE OF ORGANIZATION**

**Municipal Government County Government**

**Private Nonprofit**   
**State Agency**

**Public College/University (BRIC only)**

**LOCATION OF PROJECT:** (include Lat. and Long.) \_\_\_\_\_

**BRIEF DESCRIPTION OF PROJECT:** \_\_\_\_\_  
\_\_\_\_\_

**BRIEF DESCRIPTION OF PROBLEM TO BE SOLVED:** \_\_\_\_\_  
\_\_\_\_\_

**TOTAL ESTIMATED COST:** \_\_\_\_\_

**SOURCE OF FUNDING FOR NON-FEDERAL SHARE:** \_\_\_\_\_

State Hazard Mitigation Officer (SHMO) RA-shazmitoff@pa.gov or FAX to PEMA at 717-651-2150