

BEAUFORT COUNTY, N.C.
OFFICE OF EMERGENCY SERVICES
FIRE MARSHAL · EMERGENCY MEDICAL SERVICES
EMERGENCY MANAGEMENT · ANIMAL CONTROL

1420 Highland Drive
Washington NC 27889
(252)946-2046

FLOOD HAZARD MITIGATION ASSISTANCE APPLICATION

PLEASE RETURN COMPLETED APPLICATION AND ALL DOCUMENTATION TO 121 W THIRD ST WASHINGTON MONDAY THROUGH FRIDAY BETWEEN 8 AM AND 5 PM.

YOUR APPLICATION WILL BE REVIEWED. YOU WILL RECEIVE A FOLLOW UP PHONE CALL OR EMAIL IF MORE DOCUMENTATION IS NEEDED.

APPLICATIONS MUST INCLUDE:

- COMPLETED APPLICATION (ATTACHED)
- MODEL ACKNOWLEDGEMENT OF CONDITIONS SIGNED AND NOTARIZED (ATTACHED)
- DECLARATION AND RELEASE OF CITIZENSHIP (ATTACHED)
- FLOOD ELEVATION CERTIFICATE IF AVAILABLE
- FLOOD INSURANCE DECLARATION PAGE IF INSURED FOR FLOOD
- FLOOD PROOF OF LOSS IF INSURED FOR FLOOD
- COMPLETE WRITTEN FLOOD HISTORY IF UNINSURED (SEE SECTION 4, PAGE 4 OF APPLICATION)

FOUR EXTERIOR PHOTOGRAPHS LABELED FRONT, BACK, LEFT SIDE, RIGHT SIDE, IN DIGITAL FORMAT EMAILED TO LISA.WILLIAMS@CO.BEAUFORT.NC.US SUBJECT LINE: THE ADDRESS OF THE PROPERTY.

COMPLETED APPLICATIONS ARE ADDED TO THE MITIGATION FILES OF OUR OFFICE FOR USE IN FUTURE MITIGATION PROJECTS. PLEASE UNDERSTND THAT APPLICATION DOES NOT GUARANTEE FUNDING OR THE AVAILIBLITY OF ASSISTANCE.

North Carolina Emergency Management
Project Grant Application

Section 1
Property Site Inventory (Part 1 of 4)

Note: Please complete and submit a full Property Site Inventory for each structure involved in an acquisition, elevation, or mitigation reconstruction project. This form must be signed by the property owner as participation in the program must be voluntary. NCEM will only accept this form for inclusion in a mitigation project.

Attach tax cards, elevation certificates (if available), proof of flood insurance (if available), and photographs of each property (one photo of each side).

Owner Information

1. Name of Structure Owner (s): _____
2. Name of Property/Land Owner (s): _____
3. Street Address (including city, state, and zip code) or Physical/Legal Location of the damaged property:

*** Email Address:**

4. Mailing Address (if different from site address):

5. Contact Phone Number: _____
6. Are you a citizen of the United States? Yes No
 - a. If No, are you a non-citizen national of the United States? Yes No
 - b. Are you a qualified alien of the United States? Yes No(Note: You must provide documentation at time of closing)
7. Have you applied for disaster assistance in the past ten (10) years? Yes No
 - a. If Yes, provide FEMA Registration #: _____
 - b. Which disaster(s)? _____
8. Did you have flood insurance on the structure at the time of loss? Yes No
 - a. Was your home determined to be substantially damaged by local officials?
Yes No
 - b. How many claims have you filed for flood insurance in the past 10 years? _____

North Carolina Emergency Management
Project Grant Application

- c. If you received insurance claim money, how much did you receive? \$ _____
- d. Have you made a claim with your flood insurance agent for Increased Cost of Compliance coverage? Yes No
- e. Flood Insurance Agent/Company: _____
- f. Policy Number: _____
9. Are you requesting: Acquisition "buy-out"
 Elevation "house raising"
 Mitigation Reconstruction "demo/rebuild"
10. Have you participated or applied for assistance in a previous acquisition, elevation, or mitigation reconstruction program? Yes No
- a. If Yes, when? _____

Section 2
Property Site Inventory (Part 2 of 4)

Structure Information

1. Building Type:
- 1 Story w/o basement 1 story with basement Split-level w/o basement
- Split-level with basement 2 story w/o basement 2 story with basement
- Mobile Home Duplex/Apartment Other _____
2. Building Use (At the time of loss):
- Owner Occupied Rental Property Secondary Residence
- Business Property Public Building House of Worship
- Multi-Family Other _____
3. Construction Type:
- Wood Frame Concrete Block Brick Other _____

North Carolina Emergency Management
Project Grant Application

4. Foundation Type:

- Slab on Grade Crawl Space w/Ductwork Crawl Space w/o Ductwork
 Piers/Pilings Basement Other _____

5. Total Square Footage of Structure: _____ Year of Construction: _____

6. Estimated value of the structure: \$ _____

7. How is wastewater from your home treated? (i.e. Septic system or central sewer system):

8. How is the home heated (i.e. electric, natural gas, oil or solar)? _____

9. Are there any underground storage tanks located on the property? Yes No

a. If yes, please explain the size and usage: _____

10. Is there more than one parcel on the Deed for this structure? Yes No

11. Are there any additional structures or outbuildings on the property? Be sure to list any mobile homes, outbuildings, storage sheds, detached garages, carports, etc. Please list all structures, even if they are not on the tax card. Please provide pictures if possible.

Yes No

a. If yes, what is the value? \$ _____

b. Total Square Footage of structures, if known: _____

c. Please provide a description: _____

d. Are they: Attached or Detached Note: Include pictures and proof of purchase if available.

Section 3

Property Site Inventory (Part 3 of 4)

Occupancy Information

1. Was the property owner residing in the property at the time of the loss? Yes No

a. Provide the names and relationships of the individual(s) occupying the property at the time of loss.

North Carolina Emergency Management
Project Grant Application

2. Was the property occupied by the above listed individual(s) for 90 days prior to the disaster?

Yes No

3. Is this property currently occupied? Yes No

a. If yes, provide the names and relationships of the individual(s) occupying the property currently.

4. If this application involves a Mobile Home, indicate who owns the Mobile Home:

a. Who owns the land or the lot the Mobile Home rests on?

b. If the Mobile Home is located in a Mobile Home Park, please provide the Park Name and if known, the property owner's name: _____

Damage History

Please list the past damage to the property. Include damages resulting from Presidentially Declared disasters and other storm events. Please be sure to include as much detail as possible as this information will be used to assist with processing this application for assistance.

Event Date or Storm Name	Description of Damages (If flooded, include water depth inside the home)	Cost of Repairs/ Replacement

North Carolina Emergency Management
Project Grant Application

**Section 4
Property Site Inventory (Part 4 of 4)**

Statement and Acknowledgement of Voluntary Participation

The County/City certifies that any subsequent acquisition/elevation/mitigation reconstruction of property utilizing hazard mitigation funds are strictly voluntary and powers of eminent domain will not be used.

By signing this survey document, I/we, the undersigned, acknowledge that all information provided is true and correct to the best of my/our knowledge. Completing this application does not imply any additional obligation to participate in any subsequent property acquisition/elevation/mitigation reconstruction program undertaken by the County/City and does not imply any obligation by the County/City to purchase/elevate/reconstruct the above referenced property. The purchase/elevation/mitigation reconstruction of the referenced property is contingent on the State receiving funding from the Federal Emergency Management Agency (FEMA).

By signing this survey document, I/we the undersigned, agree to allow access to my/our property for the purpose of data collection.

Printed Name: _____ Date: _____

Signature: _____

Printed Name: _____ Date: _____

Signature: _____

Please complete if you are not the property owner.

I am not the owner of the above referenced structure/parcel. My interest in this structure/parcel is:

Only property/structure owners and those individuals holding power of attorney for the property are eligible to apply. If the person(s) signing this application are not the deed holder of the above referenced property/structure, please state your interest in the property (i.e. Power of Attorney). Legal proof of this information will be necessary at the time of closing.

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

Please list all owners of this property:



Beaufort County Emergency Services
1420 Highland Drive
Washington, NC 27889
(252)946-2046

I (Property Owner Print Clearly)

_____ am requesting a NFIP flood claim history payout for (Address of Property Print Clearly):

Address _____

City _____ State _____ Zip _____

Please mail my flood claim history to:
Lisa Respass Williams
1420 Highland Drive
Washington, NC 27889

Sincerely,

Signature of Property Owner

Date

DEPARTMENT OF HOMELAND SECURITY
 FEDERAL EMERGENCY MANAGEMENT AGENCY
DECLARATION AND RELEASE

*O.M.B. No. 1660-0002
 Expires August 31, 2013*

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.
- Print full name and age of minor child: 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: _____

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 Custom 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 NO.	FEMA APPLICATION NO.	DISASTER NO.	
ADDRESS OF DAMAGED PROPERTY	CITY	STATE	ZIP CODE

PRIVACY ACT STATEMENT

AUTHORITY: The Robert T. Stafford Disaster Relief and Emergency Assistance Act as amended, 42 U.S.C. § 5121 -5207 and Reorganization Plan No. 3 of 1978; 4 U.S.C. §§ 2904 and 2906; 4 C.F.R. § 206.2(a)(27); the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (Pub. L. 104-193) and Executive Order 13411. DHS asks for your SSN pursuant to the Debt Collection Improvement Act of 1996, 31 U.S.C. § 3325(d) and § 7701(c) (1).

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 control purposes.

ROUTINE USE(S): 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 - 008 Disaster Recovery Assistance Files System of Records (September 24, 2009, 74 FR 48763) 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 the individual from receiving disaster assistance.

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. 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, 1800 South Bell Street, Arlington, VA 20598-3005, Paperwork Reduction Project (1660-0002) **NOTE: Do not send your completed form to this address.**

COMPLETE HIGHLIGHTED SECTION SIGN & HAVE NOTORIZED

**Model Acknowledgement of Conditions
For Mitigation of Property in a Special Flood Hazard Area
With FEMA Grant Funds**

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 _____

As a recipient of Federally-funded hazard mitigation assistance under the Hazard Mitigation Grant Program, as authorized by 42 U.S.C. §5170c / Pre-Disaster Mitigation Program, as authorized by 42 U.S.C. §5133 / Flood Mitigation Assistance Program, as authorized by 42 U.S.C. §4104c / Severe Repetitive Loss, as authorized by 42 U.S.C. §4102a, the Property Owner accepts the following conditions:

1. 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 42 U.S.C. §4012a.
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 Title 44 of the Code of Federal Regulations (CFR) Part 60.3 and City/County Ordinance as long as the Property Owner holds title to the property. These criteria include, but are not limited to, the following measures:
 - i. Enclosed areas below the Base Flood Elevation will only be used for parking of vehicles, limited storage, or access to the building;
 - ii. All interior walls and floors below the Base Flood Elevation will be unfinished or constructed of flood resistant materials;
 - iii. No mechanical, electrical, or plumbing devices will be installed below the Base Flood Elevation; and
 - iv. All enclosed areas below Base Flood Elevation must be equipped with vents permitting the automatic entry and exit of flood water.

For a complete, detailed list of these criteria, see City/County Ordinance attached to this document.

3. The above conditions are binding for the life of the property. To provide notice to subsequent purchasers of these conditions, the Property Owner agrees that the City/County will legally record with the county or appropriate jurisdiction's land records a notice that includes the name of the current property owner (including book/page reference to record of current title, if readily 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 requires that flood insurance coverage on this property must be maintained during the life of the property regardless of transfer of ownership of such property. Pursuant to 42 U.S.C. §5154a, failure to maintain flood insurance on this property may prohibit the owner from receiving Federal disaster assistance with respect to this property in the event of a flood disaster. 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 Part 60.3 and City/County Ordinance.”

4. Failure to abide by the above conditions may prohibit the Property Owner and/or any subsequent purchasers from receiving Federal disaster assistance with respect to this property in the event of any future flood disasters. If the above conditions are not met, FEMA may recoup the amount of the grant award with respect to the subject property, and the Property Owner may be liable to repay such amounts.

This Agreement shall be binding upon the respective parties' heirs, successors, personal representatives, and assignees.

THE COUNTY OF _____ Beaufort _____

By: _____ Lisa Williams, Planning & Mitigation Specialist _____

County of _____ Beaufort _____

& _____ & _____

[Signature of Property Owner]

[Signature of Property Owner]

North Carolina _____ County I, _____, a Notary Public for said County and State, do hereby certify that _____ & _____ personally appeared before me this day and acknowledged the due execution of the foregoing instrument. Witness my hand and official seal, this the _____ day of _____, 20 _____. (Official Seal) Notary Public My commission expires _____, 20 _____.

SEAL