

# Wildfire Mitigation Projects Notice Of Interest (NOI)

## Colorado DHSEM Hazard Mitigation NOI      Wildfire Mitigation Projects

### THIS SECTION FOR STATE USE ONLY

DISASTER: \_\_\_\_\_

Colorado Identification Number: \_\_\_\_\_

Date SHMO Received Application: \_\_\_\_\_

Colorado Point of Contact:

Colorado DHSEM

Mitigation and Recovery Section

9195 East Mineral Avenue, Suite 200

Centennial, Colorado 80112

Email: scott.baldwin@state.co.us

sean.settle@state.co.us

**NOTE: NOI must be submitted in digital form.**

### PROJECT OVERVIEW

1. Applicant Legal Name: \_\_\_\_\_

Organizational Unit: \_\_\_\_\_

2. Applicant Type:     Local Government     State Government

3. Project Title: \_\_\_\_\_

4. Project Type: 

<i>(check all that apply)</i>	Defensible Space, Creation of 100' Perimeter		Ignition Resistant Construction		Hazardous Fuels Reduction
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5. Total Proposed Project Cost:    \$ \_\_\_\_\_

Federal Share (up to 75%):        \$ \_\_\_\_\_

Local Share (at least 25%):        \$ \_\_\_\_\_

### 7. Certifications:

The undersigned assures fulfillment of all requirements of the Pre-Disaster Mitigation (PDM) Grant Program as contained in the program guidelines and that all information contained herein is true and correct to the best of my knowledge.

\_\_\_\_\_  
*Typed Name of Applicant Agent*

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Telephone Number*

\_\_\_\_\_  
*Signature of Authorized Representative/Applicant Agent*

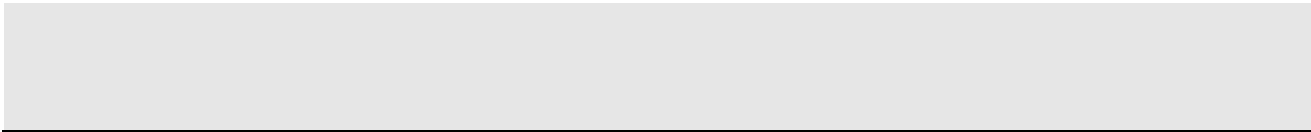
\_\_\_\_\_  
*Date Signed*

### APPLICANT INFORMATION

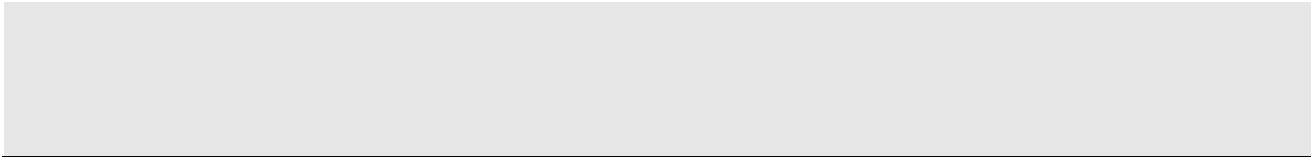
- 1. Does your community have a current FEMA approved multi-hazard mitigation plan?  Yes  No  
Location of proposed project in mitigation plan strategies Page  Section/Part
- 2. Is the community a member of **good standing** with the National Flood Insurance Program?  Yes  No
- 3. Has the community adopted the IBC nationally recognized building code?  Yes  No
- 4. FIPS Code:  DUNS Number:
- 5. **Primary Point of Contact:**  
The Primary Point of Contact is the person responsible for coordinating the implementation of this proposal, if approval is granted.  
 Ms.  Mr.  Mrs. First Name:  Last Name:   
Title:  Organization:   
Street Address:   
City:  State:  Zip Code:   
Telephone:  Fax:  Mobile:  E-mail Address:

### PROJECT DESCRIPTION

- 6. Site Location:
- 7. Site Address: (No PO or Route No.)
- 8. City, State, Zip Code:
- 9. Total Number of Acres to be Treated:  10. Average Cost per Acre:  11. Total number of homes directly affected or treated:
- 12. Do you have an approved CWPP?  Yes  No
- 13. Will this project conform to CSFS Guidelines for defensible space and/or fuel breaks?  Yes  No
- 14. Describe, in detail, the proposed project. Describe the objectives, the role of key players, and anticipated outcomes as related to the grant purpose criteria and budget. Include a description of the project area, the project's land ownership breakdown, the community in which your project will take place (if applicable, including population, number of homes and structures). If the project relates to a utility, describe the utility service area, population served, and infrastructure and/or water supplies protected. In addition to the project descriptions, provide a scope of work that clearly describes tasks in the project, anticipated outcomes and key milestones that will define project completion.
- 15. Explain the strategic nature of the project. Identify if the proposed project will take place adjacent to or in proximity to other planned or previously treated areas on state, municipal, private, or USFS lands. Explain whether the project will be implemented across land ownership boundaries; if it within a priority area identified in a completed Community Wildfire Protection Plan (CWPP) or FEMA Mitigation Plan; and/or if it is part of a larger landscape-scale treatment effort.



- 16. Describe the scientific foundation for the project, specifically the practice standards that will be applied to achieve the desired outcomes of the project. Descriptions may include the distance from homes and structures the hazardous fuels removal work will be conducted, target basal area for forest thinning, target fuel loading, target for reducing the percentage of continuous tree and shrub canopy cover. List any additional technical resources that will be utilized for this project (i.e. Colorado State Forest Service or other forestry experts and water quality BMPs).



**Special requirements:** Based on the project type(s), the sub-applicant must prepare a Supplemental Datasheet outlining compliance with FEMA wildfire mitigation program requirements. Sub-Applicants may refer to [FY15 Hazard Mitigation Assistance Guidance](#) and [FY15 Hazard Mitigation Assistance Guidance Addendum](#) for specific information.

**TIMELINE / MAINTENANCE**

1. Timeline

Insert the proposed work schedule as tasks to accomplish the overall goal of the proposed activity, i.e., appraisals, title search, closing, etc., and provide a description of the task’s purpose. This timeline will be used as a measurement tool for progress in the project’s implementation and is included in the required Quarterly Reports. Also, FEMA uses the timeline for determining the approved period of performance. It will be the basis used to justify delays or extensions, if necessary, and should be estimated carefully. The first and last entries are state requirements and have already been entered. **NOTE: If applying for DNR WRRG funding, the period of performance is two (2) years.**

Task 1:	<b>FEMA/Colorado State Contract Process</b> The State contract is the State’s legal mechanism required to ensure funding or services to the applicant. The timeframe reflects up to a 6 month period.	Timeframe: <b>3 Months</b>
Task 2:		Timeframe: _____
Task 3:		Timeframe: _____
Task 4:		Timeframe: _____
Task 5:		Timeframe: _____
Task 6:		Timeframe: _____
Task 7:		Timeframe: _____
Task 8:	<b>State Compliance Review and Closeout</b> Financial and project reconciliation with local, state, and federal concurrence.	Timeframe: <b>3 Months</b>

**Total Timeframe (must not exceed 1,095 days; 36 months; or 3 years) Timeframe: \_\_\_\_\_**

- 2. An **Operations and Maintenance (O&M) plan** must be developed for each project. For application purposes, there must be an assurance acknowledging that the project will be operated and maintained in a manner that will achieve the proposed hazard mitigation. The final plan must be submitted prior to project closeout, because FEMA will review the final O & M plan during project closeout.

\*Please note, if you are requested to complete a full application you will be required to address maintenance requirements.

For the NOI, do you provide assurance that:

- A. The wildfire project’s perimeter, building envelope, and/or fuel load interface will be maintained in a manner that will achieve the proposed hazard mitigation?  Yes  No
- B. The final O&M Plan will be provided prior to project closeout, for review by FEMA?  Yes  No

3. In addition to #2 above, the following questions are to give assurance on the project’s maintenance over its useful life. Please answer each question and give a brief explanation.

a. Who will be responsible for providing any needed maintenance for the project (usually property owner)?

[Redacted answer area for question 3a]

b. What is the cost of maintenance on an annual basis? How was this determined?

[Redacted answer area for question 3b]

**Additional Comments**

Enter any additional comments related to environmental concerns for the proposed project if desired.

[Redacted additional comments area]

\_\_\_\_\_  
SIGNATURE OF APPLICANT AGENT

\_\_\_\_\_  
TITLE

\_\_\_\_\_  
APPLICANT ORGANIZATION

\_\_\_\_\_  
DATE SUBMITTED