



ASA HUTCHINSON
GOVERNOR

STATE OF ARKANSAS
DEPARTMENT OF EMERGENCY MANAGEMENT



DAVID MAXWELL
DIRECTOR

Hazard Mitigation Notice of Intent (NOI)

Date: _____ Applicant Name: _____ County: _____
Address: _____ Point of Contact: _____
Phone: _____ Email Address: _____

Does the jurisdiction have a current FEMA approved Mitigation Plan? Y N (mandatory for projects)
Has an NOI for this project previously been submitted to ADEM that went unfunded? Y N Date: _____

Please check all community commitments to mitigation:

- National Flood Insurance Program (mandatory for flood projects)
- Community Rating System (CRS)
- Fire Wise Community
- Storm Ready Community
- Additional Mitigation training: _____

Provide a description of the project: (Attach additional sheets if necessary)

List the specific area affected by the proposed project (County/City/Subdivision/Street):

Number of individuals this project will protect: _____ Total estimated cost of project: _____

Is local match available? (mandatory) _____ Local match amount: _____

All information in this Notice of Intent is true and correct and the document has been duly approved by the governing body of the applicant.

Name/Title (print) Must have authority to commit funds.

Signature

Date

Notes:

1. Current cost-match is 75% Federal and 25% local.
2. Generators, sirens, and warning systems are not eligible.
3. Safe Room size is limited to 5000 SF per location. Exceptions may be considered.
4. Safe Room design criteria must meet the standards in FEMA Pub. 361.

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