APPLICATION CHECKLIST FOR SHELTER UPGRADE

Locality Name			
	Project budget – including identification of the source of matching fund	ds	
	The max state share is \$450,000 - identify local match amount		
	What is the Fiscal Stress Index (local match)	_	
	Is the facility owned and operated by the local government	yes	no
	Is the facility in use by the local government	yes	no
	Is the facility located in Special Flood Hazard Area	yes	no
	Is the facility covered by a flood insurance policy	yes	no
Required Attachments			
	Pictures of Generator Location (if they provided them)		
	Generator Specific Information/Schematics (not required but recomme	ended)	
	Map With Generator Location Marked		
	FIRM, Identify Elevation if in SFHA		
	Storm Surge Map (if applicable)		
	Evacuation Zone Map		
	Site specific sheltering plan which includes the population to be evacua-	nted	