

Notice of Interest (NOI) Instructions

Documents to accompany NOI's:

All NOIs MUST include:

- FIRM with location of project marked
- The County Local Hazard Mitigation Plan Adoption Resolution
- Complete Line Item Budget
- **Clear explanation of the work
- Address including Latitude & Longitude
- ***Must have a current local hazard mitigation plan*** - Jurisdiction must have this project's action item for this project and Jurisdiction must have adopted the plan. The project will not be eligible if the action item is not with the County's Hazard Mitigation Plan. Please contact your Regional Planning Commission or Council of Governments to amend plan.
- Buyouts do not need a FEMA Benefit Cost Analysis if the property/acquisition is below \$276,000.00. (See FEMA Memorandum: Cost Effectiveness Determination for Acquisition and Elevations in Special Flood Hazard Areas.) **Note:** Missouri will not do elevation projects. This is a preventative measure to keep all structures out of the floodplain.
- Keep in mind, the budget you enter will be the budget SEMA will need to adhere to for FEMA funding. There is a set budget amount in the HMGP funding source. **If budgets come in higher during application development (if chosen) then this can cause a problem.**
- **Site grading, Landscaping/site restoration, demo & clearing** all require a FEMA Benefit Cost Analysis (BCA) 1.0 or greater to be turned in with NOI. These types of projects are hard to get the BCA to come out to a 1.0 or greater and we will need to justify the rating selection and consideration.
- **LWC, Culverts**, etc. - BCA, H & H Study (at least an analysis)

Note: Award consideration will be based on compliance of target population vs. of the safe room. Safe room size must be in accordance to FEMA 361 Guidance.

NOT AUTHORIZED:

- BRIDGE REPLACEMENTS OR BRIDGE REPAIRS for State or Federal roads.
- CONSTRUCTION OF A LEVEE OR REPAIRS
- ELEVATIONS
- RESIDENTIAL SAFE ROOMS

BRIC-NOTICE OF INTEREST (NOI)

(This is NOT an Application - An NOI is considered valid for two years from date of submission.)

Interested Subapplicant Information	
Date:	County:
Name of Interested Subapplicant:	
Congressional District:	
Type of Interested Subapplicant:	
State Tax Number:	
Federal Tax Number:	
Federal Employer Identification Number (EIN):	
DUNS Number:	
NFIP Member Currently in Good Standing?	
Years in NFIP:	
NFIP Identification Number:	
Delinquent on any Federal debt?	
Small, impoverished community?	
Point of Contact Information	
Title	
First-Last Name	
Agency/Organization	
Address 1	
Address 2	
City/State & ZIP	
Phone	
Email	
Alternate Point of Contact Information	
Title	
First-Last Name	
Agency/Organization	
Address 1	
Address 2	
City/State & ZIP	
Phone	
Email	
Mitigation Plan Information	
Has your community adopted a FEMA-approved local hazard mitigation plan (HMP)?	
What is the name of the plan?	
<i>**The proposed project type must be addressed in local hazard mitigation plan in order to be eligible.</i>	
Where in the plan is this mitigation goal/action project type located (section/page)?	
What date was the mitigation plan approved by FEMA?	

Mitigation Project/Plan Information			
What type of project/plan are you proposing?			
What is the community/jurisdiction population (optional)?			
Does your community/jurisdiction have a project manager or will the service be contracted?			
Please describe the proposed project/plan below. Address who benefits, why, what is the project, be specific. <ul style="list-style-type: none"> • Please provide a cost estimate and details of the estimate. • If the proposed project is an Earthquake Seismic Retrofit, please provide the estimated target population of building, who it will protect. Include the usable square footage/gross square footage. • Must include a FIRM to confirm project is not in a flood zone. 			
Project/Plan Cost Estimate & Match			
Total Project/Plan Cost Estimate		\$	
Federal Share Percentage		75.0% - \$	
Non-Federal Share Percentage		25.0% - \$	
Only If Small Impoverished Community:		Dollars	Percentage
Proposed Federal Share		\$	90%
Proposed Non-Federal Share		\$	10%
Matching Funds			
Name of Source of Non-Federal Match		Funding Type	Amount (\$)
Estimated Summary History of Past Damages Project Will Prevent in the Future			
*Date	*Event	*Description of Damage	*Amount of Damage
*Total Amount of Damage			\$

Completed NOI can be submitted via e-mail to Heidi Carver, State Hazard Mitigation Officer, Heidi.carver@sema.dps.mo.gov or to Mary Smith, State Hazard Mitigation Specialist, Mary.smith@sema.dps.mo.gov