



FEMA

Mitigation Best Practice Submission Worksheet

PAPERWORK BURDEN DISCLOSURE NOTICE

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If you have any questions or comments, please e-mail them to us at MITsuccess@dhs.gov.

★ Indicates Required Field

★ **Activity/Project Title** (Best Practice Headline)

Enter the title you wish to appear as headline for your Best Practice (maximum 100 characters).

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★ **State**

Enter the name of the state or territory where your best practice was implemented.

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★ **The geographical area for this activity/project is?**

Select only 1 by placing an 'X' in the appropriate box below

State-wide Regional (multiple Counties) Within a Single County

Is this a County-wide activity/project? Yes

ONLY answer this question if you answered "Within a Single County" to the previous question. If YES, place an 'X' in the box above. Leave the box blank if your answer is NO.

County/Counties (required unless State-wide is selected above):

DO NOT enter any Counties for State-wide activities/projects. Enter all counties that apply for Regional (multiple Counties) activities/projects. Enter **ONLY ONE** County if your activity/project is Within a Single County.

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Community/Communities (NOT - required):

DO NOT enter any Communities for Statewide or Regional (multiple Counties) activities/projects. Enter all Communities that apply if your activity/project is Within a Single County and it is not County-wide.

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★ **Sector:**

Select only 1 by placing an 'X' in the appropriate box below

- Commercial Public Residential

★ **Hazard:**

Select as many as apply by placing an 'X' in each of the appropriate boxes below

- | | | |
|---|---|---------------------------------------|
| <input type="checkbox"/> Chemical/Biological | <input type="checkbox"/> Flooding | <input type="checkbox"/> Tornado |
| <input type="checkbox"/> Coastal Storm | <input type="checkbox"/> Hurricane/Tropical Storm | <input type="checkbox"/> Tsunami |
| <input type="checkbox"/> Dam/Levee Break | <input type="checkbox"/> Mudslide/Landslide | <input type="checkbox"/> Typhoon |
| <input type="checkbox"/> Drought | <input type="checkbox"/> Nuclear | <input type="checkbox"/> Volcano |
| <input type="checkbox"/> Earthquake | <input type="checkbox"/> Severe Storm | <input type="checkbox"/> Wildfire |
| <input type="checkbox"/> Extreme Temperatures | <input type="checkbox"/> Technological | <input type="checkbox"/> Winter Storm |
| <input type="checkbox"/> Fire | <input type="checkbox"/> Terrorism | <input type="checkbox"/> Other: _____ |

★ **Category/Activity/ Project Type:**

Select as many as apply by placing an 'X' in each of the appropriate boxes below

- | | |
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| <input type="checkbox"/> Acquisition/Buyouts | <input type="checkbox"/> HAZUS-MH |
| <input type="checkbox"/> Building Codes | <input type="checkbox"/> Land Use/Planning |
| <input type="checkbox"/> Community Rating System Activity | <input type="checkbox"/> Mitigation Planning |
| <input type="checkbox"/> Cooperative Technical Partner Activity | <input type="checkbox"/> Public Awareness |
| <input type="checkbox"/> Disaster Resistant Universities | <input type="checkbox"/> Relocation |
| <input type="checkbox"/> Education & Outreach | <input type="checkbox"/> Retrofitting, Non-structural |
| <input type="checkbox"/> Elevation, structural | <input type="checkbox"/> Retrofitting, Structural |
| <input type="checkbox"/> Elevation, utilities | <input type="checkbox"/> Safe Rooms/Community Shelters |
| <input type="checkbox"/> Flood Control | <input type="checkbox"/> Training |
| <input type="checkbox"/> Flood Insurance | <input type="checkbox"/> Utility Protective Measures |
| <input type="checkbox"/> Flood Insurance Marketing | <input type="checkbox"/> Vegetation Management |
| <input type="checkbox"/> Floodplain Management | <input type="checkbox"/> Warning Systems |
| <input type="checkbox"/> Flood-proofing | <input type="checkbox"/> Wetland Restoration |
| <input type="checkbox"/> Flood Study Map Rollout/Map Modernization | <input type="checkbox"/> Other: _____ |

Cost (NOT - required):

Select only 1 by placing an ' X ' in the appropriate box below. Enter \$ amount for "Actual" and "Estimated"

Actual \$: _____ Estimated \$: _____

Unknown at this time

★ **Funding:**

Select as many as apply by placing an ' X ' in each of the appropriate boxes below

- Academic
- Business Owner
- Community Assistance Program (CAP)
- Community Rating System (CRS)
- Cooperating Technical Partners (CTP)
- Environmental/Historical Preservation
- Flood Mitigation Assistance (FMA)
- Hazard Mitigation Grant Program (HMGP)
- Hazard Mitigation Technical Assistance Program (HMTAP)
- Homeowner
- Local Sources
- Map Modernization
- Mitigation Planning
- National Dam Safety Program (NDSP)
- National Earthquake Hazards Reduction Program (NEHRP)
- National Earthquake Technical Assistance Program (NETAP)
- National Flood Insurance Program (NFIP)
- National Hurricane Program (NHP)
- Non-profit organization (NPO)
- Other Federal Agencies (OFA)
- Other FEMA funds/ US Department of Homeland Security
- Pre-Disaster Mitigation (PDM)
- Private funds
- Property owner, residential
- Property owner, commercial
- State sources
- U.S. Small Business Administration (SBA)
- Wind and Water Technical Assistance Program (WATAP)
- Other: _____

Economic Analysis (NOT - required)

Not every category of activities will have a Benefit Amount (Cost Benefit, Losses Avoided, Expected Benefit). This is particularly the case for CRS, Outreach, Marketing, and Training activities. For program and project related activities, please provide this information.

Cost Benefit (Use if funding is part of a grant application or other funding option)

\$ _____

Losses Avoided (Use if mitigation effort has been tested by a subsequent event and calculations can be made on project cost and savings realized)

\$ _____

Expected Benefit (Use if mitigation effort has NOT been tested by a subsequent event and substantiated costs are not available)

\$ _____

Not Applicable–Not activity/project oriented Use if cost/benefit can not be calculated

Structure type (NOT - required):

Select only 1 by placing an 'X' in the appropriate box below

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|---|--|--|
| <input type="checkbox"/> Concrete Block | <input type="checkbox"/> Metal-sided Building | <input type="checkbox"/> Tilt-Up |
| <input type="checkbox"/> Concrete Shear Walls | <input type="checkbox"/> Safe Room/Community Shelter | <input type="checkbox"/> Un-reinforced Masonry |
| <input type="checkbox"/> Light Metal | <input type="checkbox"/> Reinforced Masonry | <input type="checkbox"/> Wood Frame |
| <input type="checkbox"/> Manufactured Housing | <input type="checkbox"/> Steel Frame | <input type="checkbox"/> Other: _____ |

Activity/Project Start Date (NOT - required):

Enter as: month – day – year

Activity/Project End Date (NOT - required):

Enter as: month – day – year

Funding Recipient (NOT - required):

Select as many as apply by placing an 'X' in each of the appropriate boxes below

- | | |
|--|---|
| <input type="checkbox"/> Academic | <input type="checkbox"/> Local Government |
| <input type="checkbox"/> Business/Industry | <input type="checkbox"/> Non-profit – Environmental |
| <input type="checkbox"/> Critical Facility – Medical | <input type="checkbox"/> Non-profit – Religious |
| <input type="checkbox"/> Critical Facility – Police/Fire | <input type="checkbox"/> Property Owner – Residential |
| <input type="checkbox"/> Critical Facility – School | <input type="checkbox"/> Property Owner – Commercial |
| <input type="checkbox"/> Cultural Facility | <input type="checkbox"/> State Government |
| <input type="checkbox"/> Lifelines – Gas/Electric | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Lifelines – Telephone | <input type="checkbox"/> Tribal Government |
| <input type="checkbox"/> Lifelines – Water/Sewer | <input type="checkbox"/> Tribal Organizations |
| | <input type="checkbox"/> Other: _____ |

Name of Organizational Funding Recipient (NOT - required):

Enter the name of the Organization that received funding, NOT an Individual.

★ **Did mitigation effort(s) result from a federally declared disaster?**

Select only 1 by placing an ' X ' in the appropriate box below

Yes No Unknown

Federal Disaster Declaration Number:

Only enter if you answered "Yes" to the previous question. If unknown, please refer to:

<http://www.fema.gov/library/drcys.shtm>

Year (NOT - required):

Enter the Year of the disaster that the mitigation effort resulted from (if applicable)

★ **Since the mitigation effort began, has another disaster tested its value?**

Select only 1 by placing an ' X ' in the appropriate box below

Yes No Unknown

Year that disaster first tested value (NOT - required):

Enter the Year that the mitigation effort was first tested by another disaster (if applicable)

★ **Is this a Repetitive Loss Property?**

Select only 1 by placing an ' X ' in the appropriate box below

Yes No Unknown

★ **Activity/Project Contact Name:**

Activity/Project Contact Phone (optional):

Activity/Project Contact E-mail address (optional):

★ **Category/ Activity/ Project Details:**

Here is where you tell us your story. To help you, we have included a sample format at the end of this document that provides a guide for organizing your information.

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Mitigation Best Practice Guided Format

Activity/Project Title - Best Practice Headline

Select a short, descriptive phrase that will draw interest to the Best Practice.

The paragraph descriptions that follow are a “format guide” for the “Category/ Activity/ Project Details” section of the Best Practice Submission Worksheet. This will be the “body” of your Best Practice story.

First Paragraph - Synopsis

Give a brief overview of the situation—Who? What? When? Where? Why?— including the positive results of the risk mitigation measures used. If the reader only sees the first few sentences, he/she leaves with the message that mitigation works!

Second Paragraph - Introduction

Acquaint the reader with the “star of the story”, and why this testimonial is germane to the recent disaster and any state/local/community hazard mitigation efforts. Is there a FEMA partner in this story? Link all involved and clarify the collaborative effort. This is a good place to use the first quote of the story.

Third/Fourth Paragraphs - Tell the Tale

Begin weaving the factual, cultural and emotional elements of the story, and how the activity introduced earlier produced results. Reinforce the value/benefit of the risk mitigation measure taken. What were the economic savings? The emotional savings? What secondary impacts of a hazard were spared? Here is where you gain the reader’s trust, and validate his/her reasons for wanting to continue reading.

Fifth Paragraph - Promote Change

Risk mitigation measures come in all sizes; many are simple to implement and incredibly affordable. Is it clear that the reader DOES have the capacity to take the mitigation measure(s) promoted in the story? Can the reader substitute him/herself in the story?

Sixth Paragraph - Take Action

Provide the reader with the information necessary to be successful. Where can the reader get help? Be supported in future efforts? Is it a phone number? Web site? Community meeting? Home improvement store?

Final Paragraph - Positive Reinforcement

In the final sentences, reinforce the message that mitigation works and that the action(s) taken are likely to make a difference in the future. Consider using a strong quote from the story participant to send the message they’re safer because of mitigation.