

DEPARTMENT OF COMMUNITY AFFAIRS
 STATEWIDE COMPETITIVE GRANTS TO STRUCTURALLY ENHANCE OR
 RETROFIT PUBLIC HURRICANE EVACUATION SHELTERS, 2006

APPLICATION FORM

Applicant Information			
County Name			
Applicant Agency			
Mailing Address, line 1			
Mailing Address, line 2			
City, State, Zip		FL	
Contact Person(s)			
Contact Telephone#		Fax#	
Contact E-mail			
Alternate Contact			
Contact Telephone#		Fax#	
Contact E-mail			
Federal ID#			
County is participant in the National Flood Insurance Program, Community Rating System?			<input type="checkbox"/> YES <input type="checkbox"/> NO
Proposed hurricane shelter enhancement or retrofit project is listed and ranked in the County's Local Mitigation Strategy (LMS)?			<input type="checkbox"/> YES <input type="checkbox"/> NO
If yes, what is the priority ranking number?			
NOTE-Statewide, Regional and County Hurricane Shelter Space Demand and Surplus/Deficit Status will be based upon the data published in the 2006 Statewide Emergency Shelter Plan. To view the Plan or seek additional guidance on shelter design criteria, please see the following URL address: http://floridadisaster.org/bpr/Response/engineers/2006sesp.htm			

<p>AUTHORIZED SIGNATURE [Signature demonstrates an endorsement of the application by the chief elected official or the chairman of the governing board, or other duly authorized government official. Evidence of delegation of authority shall be supplied with the application.]</p> <p>Signature: _____</p> <p>Title: _____ Date: _____</p>	
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Existing Facility Information			
NOTE-A copy of ARC 4496 can be found at the following URL address: http://floridadisaster.org/bpr/Response/engineers/documents/newarc4496.pdf Also, ARC 4496 Survey, Evaluation and Ranking Guidance can be found at the following URL Address: http://floridadisaster.org/bpr/Response/engineers/documents/CheatSheet.pdf			
EXISTING SHELTER BUILDING DATA <input type="checkbox"/> Not Applicable (no existing building)			
Facility Name			
Street Address			
City, State, Zip		FL	
Latitude (decimal degrees, if available)		Longitude (decimal degrees, if available)	
Shelter inspected or surveyed by structural engineer, architect, construction technician or other knowledgeable surveyor?		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Unknown If yes, surveyors name: Date of Survey:	
Historic Building Controls Applicable?		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Unknown	
# Stories Above Grade		Shelter is located on which story(s)?	
Original Construction Date		Construction Date(s) of Major Additions	
Building Type		<input type="checkbox"/> Non-Engineered Wood <input type="checkbox"/> Non-Engineered Masonry <input type="checkbox"/> Manufactured Building <input type="checkbox"/> Lightly Engineered (built before 2000) <input type="checkbox"/> Fully Engineered (built after 2000) <input type="checkbox"/> Other:	
Structural Design Criteria		<input type="checkbox"/> Pre-1986 SBC <input type="checkbox"/> 1986 rev. SBC <input type="checkbox"/> 1991-1999 SBC <input type="checkbox"/> Pre-1996 SFBC <input type="checkbox"/> Post-1996 SFBC <input type="checkbox"/> ANSI A58.1-82 <input type="checkbox"/> ASCE 7-88, 93 & 95 <input type="checkbox"/> ASCE 7-98 & later editions <input type="checkbox"/> Florida Building Code <input type="checkbox"/> Other High Performance:	
Design Wind Speed, mph		Importance Factor & Exposure class	
Building Structural Classification		<input type="checkbox"/> High Rise Structure (6+ stories) <input type="checkbox"/> Reinforced Concrete Frame <input type="checkbox"/> Heavy Steel Frame <input type="checkbox"/> Light Steel Frame/Manufactured Metal Bldg Frame <input type="checkbox"/> Reinforced Masonry Wall Bearing <input type="checkbox"/> Reinforced Concrete Wall Bearing <input type="checkbox"/> Heavy Timber/Glulam Frame <input type="checkbox"/> Unreinforced Masonry Wall Bearing <input type="checkbox"/> Light Wood or Metal Stud Wall Bearing	
Exterior Wall Construction		<input type="checkbox"/> Reinforced Masonry <input type="checkbox"/> Partially Reinforced Masonry <input type="checkbox"/> Unreinforced Masonry <input type="checkbox"/> Reinforced Concrete (4"+ thick) <input type="checkbox"/> Reinforced Concrete (> 4" thick) <input type="checkbox"/> Metal Wall Panels (24 ga. or thicker) <input type="checkbox"/> Metal Wall Panels (>24 ga.) <input type="checkbox"/> Structural Wood Panels <input type="checkbox"/> Unprotected Glass or EIFS Curtain Wall <input type="checkbox"/> Other:	

Exterior Walls have “soft spot” materials? (e.g., EIFS on gypsum or rigid insulation boards cladding on light framing)	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Unknown If yes, describe:		
Exterior Windows adequately protected?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Unknown		
Roof Construction	<input type="checkbox"/> Std Wgt Reinforced Concrete (4”+ thick) <input type="checkbox"/> Std Wgt Reinforced Concrete (> 4” thick) <input type="checkbox"/> Metal Roof Panels (24 ga. or thicker) <input type="checkbox"/> Metal Roof Panels (>24 ga.) <input type="checkbox"/> Lt Wgt Insulation Concrete on Metal Deck (24 ga. or thicker) <input type="checkbox"/> Structural Wood Panels <input type="checkbox"/> Wood Boards <input type="checkbox"/> Poured Gypsum, Formboard or Precast Cement Fiber Panels <input type="checkbox"/> Other:		
Roof Geometry	<input type="checkbox"/> Flat or Shallow Slope <input type="checkbox"/> Gable-end Wall <input type="checkbox"/> Hipped System <input type="checkbox"/> Other:		
Roof Overhangs/ Eaves	<input type="checkbox"/> None <input type="checkbox"/> less than 2 feet <input type="checkbox"/> Greater than 2 feet		
Roof Open Span	<input type="checkbox"/> 40 feet or less <input type="checkbox"/> Greater than 40 feet Span length, feet?		
Parapets, flat roof only	<input type="checkbox"/> Parapets present; meet modern emergency overflow drainage code requirements <input type="checkbox"/> Parapets present; not known to meet modern emergency overflow drainage code requirements		
Roof Covering Type	<input type="checkbox"/> Asphalt Shingles <input type="checkbox"/> Built-up Asphalt w/loose ballast <input type="checkbox"/> Built-up Asphalt w/o loose ballast <input type="checkbox"/> Single-ply mechanically adhered <input type="checkbox"/> Single-ply fully adhered <input type="checkbox"/> Standing Seam Metal		
Estimated Age of Roof Covering, years			
Building Structural Condition	<input type="checkbox"/> Good Condition <input type="checkbox"/> Minor Structural Deterioration <input type="checkbox"/> Major Structural Deterioration		
COMMENTS:			
FLOOD HAZARD INFORMATION			
Shelter Site Elevation, feet amsl		Shelter Floor Elevation, feet amsl	
Site FIRM Zone	<input type="checkbox"/> V <input type="checkbox"/> A <input type="checkbox"/> A____ <input type="checkbox"/> B or shaded X <input type="checkbox"/> C or Unshaded X <input type="checkbox"/> Other:		
Base Flood Elevation, feet amsl		500-year Flood Elevation, feet amsl	
Shelter subject to isolation due to 100-year base flood?			<input type="checkbox"/> YES <input type="checkbox"/> NO
Storm Surge Inundation Category of Site	<input type="checkbox"/> TS/1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> Outside surge areas <input type="checkbox"/> If applicable, Cat. 5 inundation depth at ground floor, feet:		
Shelter subject to isolation due to Cat. 5 surge?			<input type="checkbox"/> YES <input type="checkbox"/> NO
Shelter has a history of flooding?			<input type="checkbox"/> YES <input type="checkbox"/> NO

COMMENTS:

Existing State Agency Funding Sources		
Are there existing state agency funds that have been granted to support or supplement local funds for this proposed shelter enhancement or retrofit project?		<input type="checkbox"/> YES <input type="checkbox"/> NO
If yes, list below		
Agency/Grant Program	Total Award Funds, \$	Unexpended Funds, \$
TOTALS, \$		
COMMENTS:		

Proposed Solution 1			
Project Title:			
Project Method: <input type="checkbox"/> New Construction <input type="checkbox"/> Addition to Existing Facility <input type="checkbox"/> Renovation of Existing Facility <input type="checkbox"/> Other:			
Project Description, provide attachments if necessary:			
Estimate of Shelter Spaces to be Created by this Proposed Grant Solution			
Building Floor Area, gross sq.ft.		Shelter Floor Area, net usable sq.ft.	
Estimate of General Population Shelter Spaces, persons @ 20 sq.ft. each			
Proposed Hurricane Wind Design Level of Performance	<input type="checkbox"/> FBC/ASCE 7 and ARC 4496 (minimum requirements) <input type="checkbox"/> Enhanced Performance (DOE-STD-1020 Performance Category 3, FBC-EHPA criteria or similar) <input type="checkbox"/> Near-absolute Protection (DOE-STD-1020 Performance Category 4, FEMA 361, or similar)		
Proposed Shelter Floor Area, gross sq.ft.		Total Estimated Project Cost, \$	
Amount Requested from State under this Grant (HMGP eligible only), \$			
Amount of Local Funds Committed, Cash \$			
Amount of Local Funds Committed, In-kind, \$			
Amount of Other Funds Committed, Cash, \$			
Amount of Other Funds Committed, In-kind, \$			
COMMENTS:			
NOTE-The high performance design criteria referenced above can be found at the following URL addresses: DOE-STD-1020 - http://floridadisaster.org/bpr/Response/engineers/documents/STD-10202002.pdf FEMA 361 - http://www.fema.gov/fima/fema361.shtm			

Proposed Solution 2		<input type="checkbox"/> Not Applicable (no second proposal)	
Project Title:			
Project Method: <input type="checkbox"/> New Construction <input type="checkbox"/> Addition to Existing Facility <input type="checkbox"/> Renovation of Existing Facility <input type="checkbox"/> Other:			
Project Description, provide attachments if necessary:			
Estimate of Shelter Spaces to be Created by this Proposed Grant Solution			
Building Floor Area, gross sq.ft.		Shelter Floor Area, net usable sq.ft.	
Estimate of General Population Shelter Spaces, persons @ 20 sq.ft. each			
Proposed Hurricane Wind Design Level of Performance	<input type="checkbox"/> FBC/ASCE 7 and ARC 4496 (minimum requirements) <input type="checkbox"/> Enhanced Performance (DOE-STD-1020 Performance Category 3, FBC-EHPA criteria or similar) <input type="checkbox"/> Near-absolute Protection (DOE-STD-1020 Performance Category 4, FEMA 361, or similar)		
Proposed Shelter Floor Area, gross sq.ft.		Total Estimated Project Cost, \$	
Amount Requested from State under this Grant (HMGP eligible only), \$			
Amount of Local Funds Committed, Cash \$			
Amount of Local Funds Committed, In-kind, \$			
Amount of Other Funds Committed, Cash, \$			
Amount of Other Funds Committed, In-kind, \$			
COMMENTS:			
NOTE-The high performance design criteria referenced above can be found at the following URL addresses: DOE-STD-1020 - http://floridadisaster.org/bpr/Response/engineers/documents/STD-10202002.pdf FEMA 361 - http://www.fema.gov/fima/fema361.shtm			

Proposed Solution 3		<input type="checkbox"/> Not Applicable (no third proposal)	
Project Title:			
Project Method: <input type="checkbox"/> New Construction <input type="checkbox"/> Addition to Existing Facility <input type="checkbox"/> Renovation of Existing Facility <input type="checkbox"/> Other:			
Project Description, provide attachments if necessary:			
Estimate of Shelter Spaces to be Created by this Proposed Grant Solution			
Building Floor Area, gross sq.ft.		Shelter Floor Area, net usable sq.ft.	
Estimate of General Population Shelter Spaces, persons @ 20 sq.ft. each			
Proposed Hurricane Wind Design Level of Performance	<input type="checkbox"/> FBC/ASCE 7 and ARC 4496 (minimum requirements) <input type="checkbox"/> Enhanced Performance (DOE-STD-1020 Performance Category 3, FBC-EHPA criteria or similar) <input type="checkbox"/> Near-absolute Protection (DOE-STD-1020 Performance Category 4, FEMA 361, or similar)		
Proposed Shelter Floor Area, gross sq.ft.		Total Estimated Project Cost, \$	
Amount Requested from State under this Grant (HMGP eligible only), \$			
Amount of Local Funds Committed, Cash \$			
Amount of Local Funds Committed, In-kind, \$			
Amount of Other Funds Committed, Cash, \$			
Amount of Other Funds Committed, In-kind, \$			
COMMENTS:			
NOTE-The high performance design criteria referenced above can be found at the following URL addresses: DOE-STD-1020 - http://floridadisaster.org/bpr/Response/engineers/documents/STD-10202002.pdf FEMA 361 - http://www.fema.gov/fima/fema361.shtm			