FLOOD CONTROL - DRAINAGE IMPROVEMENT WORKSHEET

for preliminary Benefit Cost Analysis conducted by the State Mitigation Technical Unit

Applies for the following mitigation activities: **ACQUISITION, ELEVATION, DRY FLOOD PROOFING, DRAINAGE IMPROVEMENTS, FLOOD CONTROL MEASURES, FLOODPLAIN AND STREAM RESTORATION AND FLOOD DIVERSION**. For assistance, contact the State of Florida Mitigation Technical Unit.

IMPORTANT: This worksheet is required as part of your application. The State of Florida Mitigation Technical Unit will conduct a Benefit Cost Analysis (BCA) for your project and the following information is needed to evaluate cost effectiveness. Once a preliminary BCA is completed, the reviewer will contact you to collect support documentation.

NOTE: *Having a complete worksheet will expedite the Technical Review.*

SECTION I - PROJECT GENERAL INFORMATION

Project Name	
Applicant	
Point of Contact	Name:
	Address (Please include City, State and Zip Code):
	Phone number:
	Email:
HMA Program (FMA, PDM, HMGP, 406 PA MITIGATION)	

SECTION II - STRUCTURE GENERAL INFORMATION

Select the type of critical facility to mitigate	
	Building
	Utility Infrastructure
	Road
	Other

Address			

In case of multiple sites, attach to this worksheet a list of all locations/sites involved in this project.

City, State and Zip Code			
County			
Is this a historical building?		Yes	No
Year Built	**Source** (Ex: Property Appraiser):		

In the case of utility infrastructure, provide the year of construction of the oldest structure or the average age of the structure, if improvements have been completed over the years, due to land development.

SECTION III - PROJECT COST INFORMATION

Mitigation Project Cost	$

A lump sum on this worksheet is acceptable for preliminary BCA, but a detailed breakdown attached to your application is required.

Annual Maintenance Cost	$

Relates to the amount of money you expect to spend every year maintaining the project, to ensure functionality at the time of a storm event.

SECTION IV - HAZARD / MITIGATION INFORMATION

Please select the type of project you are proposing:			
Acquisition	Elevation	Dry Flood Proofing	Drainage
Flood Control Measures	Floodplain and Stream Restoration		Flood Diversion
Other (Please describe):			

SECTION V - HISTORICAL DAMAGES / LOSS OF SERVICE

Complete the following section if the structure and or area suffered any damages in the past, otherwise refer to next section:

Utility Infrastructure			
Potable Water	Wastewater	Electrical	Gas
Telecom	Other (describe):		
What is the population being served by the utility system that will be mitigated?			
How many customers suffered outages?			
For how long was the service out (hours)? (Please list for all events)			

Roads or Bridges	
What is the two-way traffic count for this road (trips)?	
What will be additional time if traffic is routed to avoid the flooded area (hours/minutes)?	
How many miles will be added if traffic is routed to avoid flooding?	
For how long was the road or bridge closed due to flooding? (Please list for all events)	

SECTION VI - LOSS OF SERVICE

Non Residential

Fire Station	Hospital	Police Station	Other

If your critical facility is a <u>FIRE STATION</u> please answer the following questions:

How many people are served by this Fire Station?			
Select the type of area served by this Fire Station		Urban	
		Suburban	
		Rural	
Does the Fire Station provide Emergency Medical Services (EMS)?		YES NO	

Alternate Fire Station	Provide the address of the **nearest** Fire Station (Name, Street Address, City, Zip Code):	Alternate Fire Station with EMS	Provide the address of the **nearest Fire Station with EMS** (Name, Street Address, City, Zip Code):

If your critical facility is a <u>HOSPITAL</u> please answer the following questions:

How many people are being served by this Hospital?	
What is the distance in miles to the nearest Hospital capable of providing the same type of service?	
Provide the address of the nearest Hospital capable of providing the same type of service (Name, City, Zip Code):	
How many people are being served by the nearest Hospital capable of providing the same type of service?	

If your critical facility is a <u>POLICE STATION</u> please answer the following questions:

Indicate the type of area served by this Police Station	Metropolitan
	City
	Rural
How many people are served by this Police Station?	
How many Police Officers work or report to this Police Station?	
How many officers would still work from this building if it is shut down due to a disaster?	

If your critical facility is a OTHER please answer the following questions:

Other Critical Facility Buildings (please describe):

Provide a brief description of how this building is a critical facility which functions are essential to the community during a storm event:

What is the Annual Operational Budget of this critical facility?	$

SECTION VII - HISTORICAL DAMAGES

Provide a list of flood damages suffered in the past, due to a storm event.

Year	Storm Name	Property Address	Water depth (inches)	Claims ($)

Attach an additional page if necessary

Were residents trapped during the flooding	Yes No
For how long (hours)? (Please list for all events)**:**	

Has the City or County incurred any expenses attending the emergency during past events? If so, please provide details:

Incurred expenses refers to any type of expense like: rpumps, law enforcement, etc. to attend the emergency and avoid negative impact.

Year	Expense Description	Cost ($)

Attach an additional page if necessary

SECTION VIII - EXPECTED DAMAGES

(Only if preliminary or final H&H study is available. Leave blank if no H&H studies are available)

Using your H&H results, please provide **before and after mitigation data** in regards of the number of structures that will suffer damages based on the modeled scenarios (25, 50, 100-year storm event)

Before Mitigation

Recurrence Interval	Address	Estimated Structural Damages	Estimated Content Damages	Road closures (hrs.)

Attach an additional page if necessary

After Mitigation

Recurrence Interval	Address	Estimated Structural Damages	Estimated Content Damages	Road closures (hrs.)

Attach an additional page if necessary