

Project Final Narrative
Attachment 6.3 – Sub-Recipient’s Handbook
Division of Homeland Security & Emergency Management
State Hazard Mitigation Grant Program

This form is filled out when a project has been completed in full. A separate form must be submitted for each project. If you have any questions, please contact the Mitigation Section within the Division of Homeland Security and Emergency Management 907-428-7000. This form can be faxed to: Division of Homeland Security and Emergency Management, Attention State Hazard Mitigation Officer, at 907-428-7009.

Applicant Name:		Telephone Number:
Project Coordinator / Representative:		Fax Number:
Disaster Number:	HMGP Project Number:	Today’s Date:

Brief Description of Project/Scope of Work:

Physical Location of Project:

Key Dates and activity performed: (for example: date project was started, completed, describe activity, etc.)

Total Funds awarded for project:	\$ _____	
Total funds expended on this project:	\$ _____	
Cost over-runs expended on this project:	\$ _____	
Date this project was completed?	_____	

Additional comments about the project: (Include any information about circumstances that could delay the estimated project completion date or an unexpected cost overrun.)