

REQUEST FOR FUNDS
Division of Homeland Security & Emergency Management
State Mitigation Grant Program

*Fill out a separate form for **each** project. Maximum allowed advance per request is 30% of approved project amount

<input type="checkbox"/> Public Assistance	<input type="checkbox"/> Hazard Mitigation Grant Program	<input type="checkbox"/> Pre-Disaster Mitigation Grant Program	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Request For Advance	<input type="checkbox"/> Request For Reimbursement	<input type="checkbox"/> Request For Partial Payment	<input type="checkbox"/> Request For Final Payment

APPLICANT INFORMATION

PROJECT NAME:	PROJECT NUMBER:
APPLICANT NAME:	
STREET:	
CITY/ZIP:	
APPROVED PROJECT AMOUNT:	\$
TOTAL AMOUNT OF PRIOR PAYMENTS:	\$
AMOUNT THIS REQUEST: (Max advance 30% each request up to 75%. Total reimbursement 75% of total the approved project amount or 75% of the Federal Share.)	\$
MAIL CHECK TO:	DEPOSIT CHECK FOR APPLICANT:
	BANK NAME: _____
	ACCOUNT #:

THE APPLICANT AGREES:

1. That the funds will be placed in a special and separate account.
2. That the funds will be expended within 30 days of receipt. (*Applies to Advances Only*)
3. That the funds will be used only for approved actual eligible expenditures.
4. That any funds received, which are in excess of the approved actual expenditures, will be promptly refunded to the State upon completion of the project.
5. Any interest earned while these funds are on deposit will be promptly credited to the account.
6. No additional funds will be advanced until the applicant provides financial documents to DHS&EM verifying expenditures for any prior advance.
7. Reports on advanced funds are required on a quarterly basis, detailing the status of all advanced funds. This requirement is mandatory even if no expenditures have occurred.

DATE:	TITLE:
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SIGNATURE: _____

FOR DHS&EM USE ONLY

APPROVED: <input type="checkbox"/> DISAPPROVED: <input type="checkbox"/>	AMOUNT: \$
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COMMENTS: _____

DATE:	TITLE:
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SIGNATURE: _____