

MONROE COUNTY
HAZARD MITIGATION PROJECT OPPORTUNITY FORM

DATE: _____ NAME OF PROJECT: _____

Municipality: _____ County: _____

PROJECT CONTACT

TITLE: _____

AGENCY: _____

LOCATION (address) OF PROJECT: _____

Latitude: _____ Longitude: _____

LOT: _____ BLOCK: _____

PARCEL NUMBER: _____

Or Tax Parcel ID: _____

ELEVATION: _____ CERTIFICATE? Y / N _____

Is the property within the 100 yr flood plain? _____

Property is located on FIRM Panel Number: _____ Date of FIRM: _____

FLOOD INSURANCE? Y/N _____ Date of Insurance Verification: _____

BRIEF DESCRIPTION OF PROBLEM TO BE SOLVED:

BRIEF DESCRIPTION OF PROJECT:

TOTAL ESTIMATED COST: _____ ASSESSMENT VALUE AND DATE

SOURCE OF FUNDING FOR NON-FEDERAL SHARE:

Community Ranking Score _____ Date _____