

HAZARD MITIGATION GRANT PROGRAM NOTICE OF INTEREST

Control No:

All fields must be completed with valid input

[Click on Links for Help](#)

1. Disaster #:

☒ DR-4353

2. Name of Person Completing NOI:

Haley Dodson

3. NOI Instructions have been received and read:

☒ Yes ☐ No

4. Federal Information Processing Number (FIPS #):

079-240A1 nnn-nnnnn

5. Data Universal Numbering System (DUNS #):

057578221 nnnnnnnnn

6. Applicant Name:

Cambria Community Services District

7. Applicant Address:

P.O. Box 65

City: Cambria State: California Zip Code: 93428

Project Location: San Luis Obispo ▼

8. Applicant Type:

☐ City ☐ County ☐ State ☐ Private Non-Profit ☒ Special District ☐ Tribal

EIN (For Private Non-Profits):

9. Legislative Districts:

Applicant

Project Site

State Assembly: 35

35

State Senate: 17

17

U.S. Congressional District: 24

24

10. Authorized Applicant Agent:

First Name: Jerry

Last Name: Gruber

Salutation: Mr.

Title: General Manager

Address: P.O. Box 65

City: Cambria

State: California

Zip Code: 9342

Phone: 805 - 927 - 6230 Ext: 130

Fax #: 805 - 927 - 5584

E-Mail Address: jgruber@cambriacsd.org

11. Project Manager/Working Contact:

First Name: William

Last Name: Hollingsworth

Salutation: Mr.

Title: Fire Chief

Address: 2850 Burton Drive

City: Cambria

State: California

Zip Code: 9342

Phone: 805 - 927 - 6240 Ext: 311

Fax #:

805 - 927 - 6242

E-Mail: whollingsworth@cambriacsd.org

Address:

12. Project Manager/Working Contact (Alternate):

First Name: Haley

Last Name: Dodson

Salutation: Ms.

Title: Confidential Administrative Assistant

Address: P.O. Box 65

City: Cambria

California

State:

Zip Code: 9342

Phone: 805 - 927 - 6235 Ext: 135

Fax #: 805 - 927 - 5584

E-Mail: hdodson@cambriacsd.org

Address:

13. ApplicationType: ☐ Project ☒ Planning ☐ 5% Activity**14 Hazard Type:** Fire ▼**15. Activity Type:** Planning ▼**16. Activity Title/Name:** Forest Management**17. Population**
(Planning Activities
Only): 6200**18. Activity****Location:**

Cambria Community Services District

**Latitude &
Longitude**

35.563278

-121.090789

E.g,34.324862 -120.345677

19. Describe the problem to be mitigated:

The Cambria Community is situated in the middle of a forest with Monterey Pine and Oak trees predominate. Though efforts to provide fuel and fire breaks have been on-going there is much work still to be done with no resources available outside of grants. The drought conditions of the last 5 years has increased the available fuel as many Monterey Pines have died and have accumulated on the forest floor or are still standing. The probability of a significant fire occurring in the area is

20. Describe the scope of work:

The Cambria Community has a Forest Management Plan in place to properly oversee the maintenance of the forest while reducing the probability of a severe wild fire. There is no one in place to implement the plan. A Forest Ecologist will provide needed leadership to implement the following plans:

- Supporting the ongoing aggressive efforts to reduce the fuel load problem through a variety of methods such as chipping, forest remulching, salvage logging, and hand clearing.

21. Performance Period: 36 Months

22. Duplicate Programs:

Is this activity eligible for funding from another federal program such as the NRCS Emergency Watershed Protection Act, FEMA Public Assistance Program, and the US Department of Agriculture/Department of the Interior Healthy Forest Restoration Act of 2002?

☐ Yes ☒ No ☐ Uncertain

If yes, identify the program and the Disaster Survey Report, Project Worksheet, or application number(s).

23. Activity Costs:

Federal
Requested Share: \$ 135,000
Applicant Match: \$ 45,000
Total Activity Cost: \$ 180,000
Source of 25% non-federal match:

general funds

24. LHMP Approval Date: February 7, 2018

25. Local Hazard Mitigation Plan:

Provide a narrative that identifies how the proposed project activity is in conformance with your FEMA-approved Local Hazard Mitigation Plan (LHMP). Any references to the LHMP must include the page number and/or section.

The approved LHMP specifically cites the Fire Management Program as a key to mitigating the most highly rated hazard, wild fire, to the Cambria Community. Hazard: Wild Fire section of the LHMP pages 90 through 103.

Electronic Notification of NOI Status, Workshops, and Application Updates

The Hazard Mitigation Grant Program will provide immediate notification of your NOI status following our review. Please provide us with the contact information for 1 of your staff.

(If the contact is the same as entered above, please reenter the information below. This person will receive information about workshops and updates regarding the application process.)

Contact Person:

Name: (Last, First)

Hollingsworth, William

Email Address:

whollingsworth@cambriacsd.org

Created on 03/12/2018 08:51:15 AM

NOTE: Please print this form before clicking the *Submit NOI* button below.

You will not be able to print the NOI once you have pressed the *Submit NOI* button.

You will receive a project control number once you click on submit button. Please retain this number and include it in any correspondence with Cal OES regarding your project.

Submit NOI

(FYI: Pressing the Submit NOI button will save and submit your NOI to the Governor's Office of Emergency Services for Approval. Please ensure that you have filled out this form with as much detail as possible.)