HAZARD MITIGATION GRANT PROGRAM NOTICE OF INTEREST

Control No:

All fields must be completed with valid input Click on Links for Help

<u>1. Disaster #:</u>	🖲 DR-4	353					
2. Name of Perso Completing NOI:		odson					
3. NOI Instruction have been receiv and read:		O No					
<u>4. Federal</u> Information Processing Number (FIPS #)	079-240	A1	nnn-nnnnn				
5. Data Universal Numbering Syste (DUNS #):	0575782	221	nnnnnnnn				
6. Applicant Nam	e: Cambria	Communit	y Services Distri	t			
7. Applicant Address:	P.O. Box	c 65					
City:	Cambria	1		St	ate: California	Zip 93428 Code:	
Project Location	1: San Luis	s Obispo 🔻					
8. Applicant Type	<u>):</u>	City	County 🔲 State	Private Non-Profit Spece	cial District 🔲 Tri	bal	
EIN (For Private Profits): 9. Legislative Dis							
			olicant		Project Site		
State Asse	-	5		35			
State Sena	ate: 17	7		17			
	ressional 24	4		24			
District:							
10. Authorized A	pplicant Age	ent:					
First Jerry				Last Grul	ber	Salutation	ו: Mr.
Name:				Name:			
	al Manager	•					
Address: P.O. B	ox 65						
City: Camb	ria				ornia	Zip Code	9342
Phone: 805	007	<u> </u>		State:			
	- 927	- 6230	Ext:				
	- 927	- 5584					
EMail jgrube Address:	er@cambria	csd.org					
11. Project Mana	aer/Working	Contact:					
First Williar		oomact.]	Last Holl	ingsworth	Salutatior	n: Mr.
Name:				Name:	<u> </u>		
Title: Fire C							
Address: 2850 I	Burton Drive	е					
City: Camb	ria			Calif	ornia	Zip Code	9342
·				State:			L
Phone: 805	- 927	- 6240	Ext: 311				
Fax #:							

3/12/2018	Califo	ornia Emergency Management Agenc	y - Notitice of Interest Application	
	805 - 927 - 6242			
EMail	whollingsworth@cambriacsd.org			
Address				
	ct Manager/Working Contact (Alterna	<u>ite):</u>		
First Name:	Haley		Last Dodson	Salutation: Ms.
Title:	Confidential Administrative Assis	stant	Name:	
Address	P.O. Box 65			
City:	Cambria		California	Zip Code: 9342
			State:	
Phone:	805 - 927 - 6235 Ex	<t:< td=""><td></td><td></td></t:<>		
Fax #:	805 - 927 - 5584			
EMail Address	hdodson@cambriacsd.org			
Audiess				
<u>13. Appli</u>	cationType: Project Plann 	ing 🔍 5% Activity		
		. ,		
<u>14 Hazar</u>	d Type: Fire ▼			
15. Activi				
<u>10. Activi</u>	Defensible Space			
<u>16. Activ</u> i	ity Title/Name: Fuel Reduction - Ca	mp Ocean Pines/Randall Cor	ridor	
17. Popul	lation Activities			
<u>(Plannių</u> <u>Only):</u>	Activities			
18. Activi	itv			
Location				
	cean Pines/Randall Drive co tely surrounding the youth		e road and	
compre	tery surrounding the youth			
Latitude	&	1		
Longitud		-121.08572	E.g,34.324862 -120.345677	
19 Doco	ribe the problem to be mitigated:			
	mbria Community is situated	in the middle of a fore	st with	
Monter	ey Pine and Oak trees predo	minate. The intermixing	of	
	is typical of a urban wild	-	h houses	
	ll lots directly next to fo ating the housing area. Th		fuel and	
fire b	reaks have been on-going th	ere is much work still t	o be done 🖕	
	o resources available outsi			
CONULL	ions of the last 5 years ha	S THEFEASER THE ANALIADI	C INCT OS //	
<u>20. Desci</u>	ribe the scope of work:			
Dead a	nd duine there uitll be also	red in the area along wi	th the fuel	
±10 - 1 - 1				
	s on the forest floor. Add	itionally invasive plant	growth,	
much o		itionally invasive plant (i.e. Scotch Broom) will	growth, be cleared.	
much o A fire impede	s on the forest floor. Add f it with high oil content /fuel break will be created the growth of a wild fire.	itionally invasive plant (i.e. Scotch Broom) will , in most cases a shaded	growth, be cleared. break, to	
much o A fire impede	s on the forest floor. Add f it with high oil content /fuel break will be created	itionally invasive plant (i.e. Scotch Broom) will , in most cases a shaded	growth, be cleared. break, to	

21. Performance Period:	36

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).

			1

23. Activity Costs:

Federal			
Requested Share:	\$	48,000	
Applicant Match:	\$	16,000	
Total Activity Cost:	\$	64,000	
Source of 25% non	-fe	ederal match:	
General Fumds			

<u>24.</u>	LHMP	Approval	Date:	Februar	y 7, 2018	
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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 fire break work as key to	
mitigating the most highly rated hazard, wild fire, to the Cambri	Э
Community. Hazard: Wild Fire section of the LHMP pages 90 throug 103.	I

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:	-
whollingworth@cambriacsd.org	

Created on 03/12/2018 09:03:28 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.)