



New Hampshire Department of Safety
Division of Homeland Security and Emergency Management

Hazard Mitigation Quarterly Reporting Form

Hazard Mitigation Quarterly Reporting Form

Subrecipient Report Information

1. Primary Point of Contact (POC):
2. Sub-Recipient Name (City/Town/Entity Name):
3. Sub-Recipient Address:
4. Sub-Recipient Phone:
5. Project Name:
6. Performance Period:
 - January 1 to March 31 (Report Due April 15)**
 - April 1 to June 30 (Report Due July 15)**
 - July 1 to September 30 (Report Due October 15)**
 - October 1 to December 31 (Report Due January 15)**
7. Please select the grant program for this report:
 - Building Resilient Infrastructure & Communities (BRIC)**
 - Flood Mitigation Assistance Grant (FMA)**
 - Hazard Mitigation Grant Program (HMGP)**
 - High Hazard Potential Dam (HHPD) Program**
 - Pre-Disaster Mitigation Grant Program (PDM)**
8. Please indicate risk rating:
 - Low (no indication of heightened risk on Award Letter)**
 - Medium**
 - High**

(In accordance with 2 CFR 200, all recipients and subrecipients must undergo monitoring measures to include identification of risk. Please refer to your HSEM Award Letter to identify if you are Medium or High. If this letter does not indicate either rating, you are consider Low.)

Status Reports

- 9. Please describe what significant activities have occurred that detail the progress and status of the plan/project during this quarter.

This report MUST have a status narrative, percentage of project/plan completed (for each community plan including each plans estimated date of submission to HSEM for review), as well as an estimated completion date for the project/plan.

- 10. Percentage of Scope of Work Complete (0 to 100):

- 11. Describe in detail any problems, delays, or other issues that may have been encountered and you may require assistance on.

E.g. "The Hazard Mitigation Plan is going to expire before submittal" and reasons why or, "There will be a request for a change in the Scope of work" and why. If the plan/project is not going to be completed within the period of performance, information relating to this must be included within this section.

- 12. Has any additional construction been completed since the last quarter?

Yes

No

Not Applicable

If "Yes", please include a photo of construction progress.

- 13. Were permits obtained and signed since the last quarter?

For construction projects applicants must follow all applicable local, state, and federal laws, regulations, and requirements and/or obtain proper local, state, and federal permit. Signed copies of required permits are required at the time of closeout for submission to the Federal Emergency Management Agency (FEMA).

Yes

No

Not Applicable

If "Yes", please include a copy of the permit.

Financial Overview

14. Please provide an analysis of expenditures during this quarterly report performance period

15. Total Federal Grant Share:

16. Total Federal Funds Expended to Date:

17. Total Non-Federal Matching Funds Required:

18. Total Non-Federal Matching Funds Expended to Date:

Medium/High Risk Reporting

Only fill out the following if your award letter indicates you are a Medium or High Risk subrecipient.

19. Are Cost Overruns Expected? Yes No
If yes, explain why including the cost overrun amount.

20. Is your project experiencing or anticipated to experience environmental, historical, or permitting issues? Yes No
If yes, please explain the reason for the environmental, historical, or permitting issue(s).

21. Is this project experiencing or anticipated to experience any other type of project issue (i.e. scope of work change, procurement, documentation, etc.)? Yes No
If yes, explain the other issues that you are experiencing/anticipate.

22. Would you like a conference call or an in person meeting to discuss any of the items mentioned above? Yes No

Certification and Submission

By Selecting the Box Below and entering my name and today's date, I agree that I understand that these forms are required to be submitted on a quarterly basis. I understand that failure to report by the deadline or providing any false information may result in the inability to distribute any further monies or benefits related to this project until a complete and accurate report has been sent to NH HSEM. In addition, failure to report on time may result in the loss of future funding/grant awards.

I understand and Agree

Name:

Submission Date: