## SPECIAL PROJECTS CHECK LIST

(ITEMS IN THE PACKAGE SHOULD FOLLOW THE ORDER OF CHECKLIST)

	Disaster: 4339  e Project
_	blicant Name
_	MA PA CODE (FIPS) No
_	posed Project Address
	orner Coordinates of the Proposed Project:
_	plicant Request Letter to COR3
	of related Project Worksheet Number(s) and Grants Portal reference number:
_	cinity map showing proposed location, disturbed areas, waterways & wetlands
_	ap or drawing showing existing footprint and proposed footprint
☐ Cor	nplete and include the New Special Consideration Form (9 Questions) for Imp/Alt Project Request attached)
☐ Nev	v Scope of Work (SOW) for Proposed Project shall include:
	Complete SOW development and change information support as listed in permanent work section of Table 9 of the PAPPG
	Any available costs, plans, spec's, contracts, functional area square footage comparisons between damaged facility and proposed, additional information as requested by COR3/FEMA.
	Determine work to be performed; identify location of work, capacity, footprint, alignment, and size of proposed facility; specific improvements or changes beyond disaster-damage restoration (for Improved Project); and disposition of disaster-damaged facility (for Alternate Project, Public Assistance Program and Policy Guide (PAPPG) Chapter 2: VII.G.6., page 1152)
	Ensure work follows the uses allowed per PAPPG Chapter 2: VII.G.3. (pages 110-112)
	Confirm (for Alternate Project with Bipartisan Budget Act (BBA) funding approved) that new SOW will be constructed to an approved industry standard. Cite industry standard(s) applied to new SOW
	Review project for compliance with appropriate Environmental and Historic Preservation (EHP) laws, regulations, and Executive Orders (EOs). Include information such as ground disturbance, facility age, floodplain/wetland impacts, anticipated permits, etc. (See FEMA Environmental Considerations Green sheets for FEMA DR-4339-PR attached)
	Review Hazard Mitigation Proposal (HMP) for damaged components of the facility only (for Improved Project). HMPs are not eligible for a 406 Alternate Project. For 428 Alternative Procedures Projects, HMPs will only be considered based on the actual recovery solution to be implemented. If the recovery solution results in reduction of risk to the function of a damaged facility, 406 mitigation costs may be eligible and included in the fixed-cost subaward. Request HMP assistance as necessary
	planation of all ground disturbing activities (digging, excavation, structure removal, soil

SUPPOI	KTI	NG DOCUMENTATION:	
		*Copies of all Federal and State environmental and regulatory permits and approvals, and/or other relevant documentation (e.g., environmental site assessments or Phase I's environmental baseline surveys, or other environmental reports) [IF APPLICABLE AND AVAILABLE]	
		*Documentation of consultation with the State Historic Preservation Officer (SHPO) and/or other relevant State and local agencies by Applicant, State or FEMA personnel [IF APPLICABLE AND AVAILABLE]	
		*Projected construction project schedule (timeline) from Approval to Completion [IF APPLICABLE]	
		Copies of PW's and applicable photos (clear pictures or digital format)	
		Copies of insurance settlement documents (particularly Statements of Loss), including Adjuster estimate of damages.	
	*In	formation not required for equipment or contents projects	
		Cost Estimate of new SOW; reason for change (see PAPPG, Table 9, page 138)	
		Cost estimate of new SOW; for improve projects: construction timeline/project schedule. For Alternate projects: community benefitted and construction timeline/project schedule. [Time extension request if new project schedule exceeds the previously approved period of performance (POP)]	
	<b>A.</b>	<ol> <li>Improved Projects</li> <li>The Subrecipient must obtain approval from the Recipient. If the projects significantly change the pre-disaster configuration of the facility (for example, location, footprint or size) the Recipient must forward the request to FEMA prior to the start of construction to ensure that the Improved Project complies with appropriate EHP laws, regulations and Executive Orders.</li> <li>Alternate Projects</li> <li>The Subrecipient, through the Recipient, must obtain approval from FEMA. If the project involves construction, the Subrecipient must obtain FEMA approval prior to start the construction.</li> </ol>	
<u>For all P</u>	<u>roje</u>	ect Types	
		onstruction prior to FEMA approval in Grants portal may jeopardize project funding as FEMA must bliance with EHP laws, regulations, and Executive Orders.	
I certify that I have submitted all the documentation required for this project review.			
Subrecipient Name or Authorized Representative Name			
Subrecipient Signature / Authorized Representative			
CONTA	CT	(NAME/PHONE):	
		STATE PDMG	
	_	FEMA PDMG/()	
FEMA/STATE USE ONLY			
		FEMA SECTOR LEAD SIGNATURE	
		STATE SECTOR LEAD SIGNATURE	
		STATE DIRECTOR SIGNATURE	