

PLANNING AND COMMUNITY DEVELOPMENT

Commissioners:

Rebecca A. Burke, Chairperson
Ernest P. Larson, Vice-Chairperson
Jeff C. Wheeland, Secretary

Location:

Executive Plaza
330 Pine Street
Williamsport Pennsylvania 17701



www.lyco.org

Kurt Hausammann, Jr., AICP, Director

Voice: (570) 320-2130
Fax: (570) 320-2135
e-mail: lycoplan@lyco.org

Mailing Address:
48 West Third Street
Williamsport Pennsylvania 17701

To: Interested Property Owner

Subject: Hazard Mitigation Grant Program Project Opportunity Form

On the reverse side of this memo is a Project Opportunity Form which will ask you for your contact information, project description and flooding history. Please complete this form to the best of your ability. It will aid us in determining the project's feasibility and scope.

Please note, by completing this form, you are not obligated to complete the requested project, nor does it commit the County of Lycoming to provide funding for the project. This form is intended to simply identify and evaluate potential mitigation solutions.

Once completed, please submit this form via one of the following options:

- E-mail: svitko@lyco.org,
- Fax: (570) 320-2135, or
- Mail: Attn: Sal Vitko, 48 West 3rd Street, Williamsport, PA 17701.

Please complete this Project Opportunity Form and return it to me as soon as feasible.

Please do not hesitate to contact me by e-mail at svitko@lyco.org or by phone at (570) 320-2133 if you have any questions regarding this form or your desired mitigation project.

Sincerely,

Sal Vitko

Sal Vitko
Hazard Reduction Planner

HAZARD MITIGATION PROJECT OPPORTUNITY FORM

Property Information

Owner's Name (if different than contact): _____

Location of Project (ADDRESS): _____

City: _____ State: _____ Zip: _____

Tax Parcel Number: _____ Municipality: _____

Property Type (circle one): Primary / Secondary / Non-residential

Is the property within the 100-year floodplain? Y / N / Not Sure

Historic Status: Y / N / Not Sure

Does the owner currently carry flood insurance? Y / N

Contact Information

Name: _____ Date: _____

Address: _____

Phone Number: _____ E-mail Address: _____

Brief Description of the Project: (Buyout/Elevation/Retrofit/Etc.)

Brief Description of Project to be Solved:

PLEASE CHECK ANY ITEMS YOU MAY ALREADY HAVE IN YOUR RECORDS:

SPECIFIC PROJECT INFORMATION:

Contractor quote for project cost: \$ _____

Recent Appraisal _____ Elevation Certificate _____

HISTORICAL INFORMATION ABOUT THE HAZARD YOU WISH TO MITIGATE:

Past Flood Insurance Claims _____ Pictures _____ Videos _____

News Articles _____ Other _____