

TORNADO SAFE ROOM WORKSHEET

for preliminary Benefit Cost Analysis conducted by the State Mitigation Technical Unit

Applies for the following mitigation activities: **NEW SAFE ROOM, RETROFIT OF EXISTING STRUCTURE, COMMUNITY SAFE ROOM, RESIDENTIAL SAFE ROOM.** For assistance, contact the State of Florida Mitigation Technical Unit.

IMPORTANT: This worksheet is required as part of your application. The State of Florida Mitigation Technical Unit will conduct a Benefit Cost Analysis (BCA) for your project and the following information is needed to evaluate cost effectiveness. Once a preliminary BCA is completed, the reviewer will contact you with results and/or to collect support documentation.

NOTE: Having a complete worksheet will expedite the Technical Review.

SECTION I - PROJECT GENERAL INFORMATION

Project Name			
Applicant			
Point of Contact	Name:		
	Address (Please include City, State and Zip Code):		
	Phone number:		
	Email:		
HMA Program (FMA, PDM, HMGP, 406 PA MITIGATION)			

SECTION II - STRUCTURE GENERAL INFORMATION

Provide the following information for the structure you will be mitigating.

Address			
In case of multiple sites, attach to this worksheet a list of all locations/sites involved in this project.			
City, State and Zip Code			
County			
Is this a historical building?	Yes	No	
Year Built		Source (Ex: Property Appraiser):	

SECTION III - PROJECT COST INFORMATION

Mitigation Project Cost	\$
A lump sum on this worksheet is acceptable for preliminary BCA, but a detailed breakdown attached to your application is required.	
Annual Maintenance Cost	\$
Relates to the amount of money you expect to spend every year maintaining the project, to ensure functionality at the time of a storm event.	

SECTION IV - HAZARD / MITIGATION INFORMATION

Is this a new safe room or retrofit of existing structure?	New Safe Room	Existing
Is this a stand-alone or portion of existing structure?	Stand-alone	Internal Safe Room
Is this a community or residential safe room?	Community	Residential

SECTION V - SAFE ROOM INFORMATION

What would be the maximum occupancy for the safe room (number of occupants)?	
What would be the square footage of the safe room?	
What is the wind speed the safe room will be designed to withstand in accordance with FEMA P-361?	
What is the size of the community that will use the safe room (radius, in miles)?	

What is the predominant structure type(s) that people will leave to go to the safe room (indicate up to two types):	
Institutional (e.g. hospital, dormitory)	Manufactured Housing (includes mobile homes)
One- or two- Family Residences	Open Areas (parkland, fairgrounds, etc.)
Pre-engineered Metal Building (e.g. auditorium)	School (k-12)
Small Professional Building (unreinforced masonry)	

Enter the percent of total occupancy coming from each structure type (Each period must equal 100%):

	Time	Structure Type:	Structure Type:	Total
Day	6:00 AM - 6:00 PM			
Evening	6:00 PM - Midnight			
Night	Midnight - 6:00 AM			