Iowa Flood Mitigation Program (FMP) Flood Recovery Project Application

I. Applicant Information

A. Applicant/Community Name		B. Address				City, State	, Zip Code
M&P Missouri River Levee District		10 North Walnut Street		PO Box 189		Glenwood, l	owa 51534
an	00.11						
C. Point of Contact (POC) Name for Project		POC Title	POC Agency	POC Email			Email
John Poore Chairperson		Chairperson		johnrpoore@msn.com			
POC PO Box and Zip POC Street Address POC City, State, Zip Code POC Phone					POC Phone		
Code	FU	c street Address	POC City, State, Zip Code			'	roc riione
51503	1	7628 Allis Road	Coun	Council Bluffs, Iowa 51503		(4	02) 306-6895
Alternate POC Name or Authorized Representative Alt POC Title		Alt POC Title	Alt POC Agency	Agency Alternate F		POC Email	
Matthew G Woods		Attorney/Secretary	Woods, Wyatt & Tucker, PL	.c	<u>m</u> a	att.woods@wo	odswyattlaw.com
Alt POC PO Box and							
Zip Code Alt POC Street Address		Alt POC City, State, Zip Code		Al	t POC Phone		
PO Box 189, 51534 10 North Walnut Street		Glenwood, Iowa 51534		(7	12) 527-4877		
D. Federal Tax ID # / FEIN E. County Name		F. US Congressional District(s)		State Le Senate	gislative Districts House		
Mills/Pottawattamie		3			12	23	
G. Is the Applicant/Community participating in the National Flood Insurance Program (NFIP)?			onal	Community's CID Number			
No							

II. Project Cost Information

A. Identify the requested funding source:	Permanent Work

B. Project Budget Summary

Debris and silt removal	\$ 791,089.00
Providing fill material to USACE levee repairs	\$ 1,997,025.00
Emergency Work	\$ 10,390.00
Engineering	\$ 68,825.00
Total Project Budget Summary	\$ 2,867,329.00

C. Project Funding Source

Identify all anticipated funding sources for the project and the amounts.

 $State\ that\ you\ have\ applied\ for\ and/or\ received\ approved\ federal,\ state\ and/or\ local\ financial\ assistance.$

Please insert additional rows as needed.

Identify source Applied/Received		Federal \$ State \$		Local \$	TOTAL
Flood Mitigation Board		\$ -	\$ 2,479,462.66	\$ -	\$ 2,479,462.66
Other				\$ 387,866.34	\$ 387,866.34
					\$ -
					\$ -
					\$ -
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					\$ -
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					\$ -
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					\$ -
Total Project Funding Source		\$ -	\$ 2,479,462.66	\$ 387,866.34	\$ 2,867,329.00

III. Project Plan Summary

A. Provide a brief description of the project and how the project supported flood response or will support future flood recovery and flood mitigation activities. This is a summary of Tab B - Project Plan.
Removal of debris from within the District, removal of silt from existing ditches
B. Provide a brief description of the financial assistance need through the Flood Recovery Fund.
Due to the amounts of debris, silt, and damaged infrastructure throughout the District, we are requesting funds to help with the improvements. Flood Mitigation Board has provided funding in the amount of \$1,709,474. Balance of project to fund is \$769,988.66.
C. Explain how financial assistance through the Flood Recovery Fund is essential to meet the necessary expenses or serious needs of the applicant related to flood response, flood recovery, and flood mitigation.
At this time, the District has not assessed for anything more than the typical years' operation and maintenance costs. The cost of the flood damages greatly outweights the typical assessment value.
D. Provide details of any additional funds that can be applied to the project.
E . Description of Project Location (i.e. Latitude and Longitude (minimum 6 digits after the decimal), Neighborhood, Subdivision, Geographic
Boundaries, Driving Directions, etc.) A copy of the plans for the debris/silt removal has been attached showing locations of the improvements.

IV. Work Schedule

A. List the major milestones for this project.

Task	Months/Years from Award			
Task	Start	Complete	Responsible Party	
Debris and Silt removal	2/15/2020	5/1/2020	Contractor; will be bid	
Total Project Duration:	36			

V. Certifications

To the best of my knowledge and belief, I certify that all data in this application packet is complete, true and correct. The governing body of the applicant has duly authorized this document and hereby applies for assistance as documented in this application. The applicant understands that the project shall not proceed until Flood Mitigation Board approval is granted.

Signature of the Chief Executive Officer	Signature of the Authorized Representative
Name of the Chief Executive Officer	Name of Authorized Representative
Title	Title
Organization	Organization
Date	Date
Phone Number	PO Box / Street Address
	City, State and Zip Code
	Phone Number
	Email Address