

TAB A: Notice of Intent Form

Commonwealth of Virginia
**NOTICE OF INTEREST
IN APPLYING FOR STATE PUBLIC ASSISTANCE**

Name of Incident:

Incident Date or Period:

Description of Incident:

Estimate of Total Eligible Costs:

CHECKLIST OF DAMAGES BY CATEGORY

A. DEBRIS CLEARANCE

- ☐ On Public Roads & Streets including ROW
☐ Other Public Property
☐ Private Property (*When done by local govt. forces*)

B. PROTECTIVE MEASURES

- ☐ Life and Safety
☐ Property
☐ Health
☐ Stream/Drainage Channels
☐ Structure Demolition

C. ROAD SYSTEM

- ☐ Roads ☐ Streets ☐ Traffic Control
☐ Bridges ☐ Culverts
☐ Levees

D. WATER CONTROL FACILITIES

- ☐ Dikes ☐ Dams
☐ Drainage ☐ Irrigation Works

E. BUILDINGS AND EQUIPMENT

- ☐ Buildings and Equipment
☐ Supplies or Inventory
☐ Vehicles or Other Equipment
☐ Transportation System

F. PUBLIC UTILITY SYSTEMS

- ☐ Water
☐ Sanitary Sewage
☐ Storm Drainage
☐ Light/Power

G. OTHER (*Not in the above categories*)

- ☐ Park Facilities ☐ Recreational Facilities

Name of City or County Applying for Assistance:

Representative 1:

Representative 2:

Title:

Title:

Business Address:

Business Address:

Business Telephone:

Business Telephone:

By signing this letter of intent, I am certifying that the [REDACTED] is incapable of covering the full costs of the damages and/or expenses associated with the event referenced above.

Signature:

Date: