

**COMMONWEALTH OF PENNSYLVANIA**  
**PENNSYLVANIA EMERGENCY MANAGEMENT AGENCY**

**REQUEST FOR IMPROVED PROJECT**

(PREPARE A SEPARATE REQUEST FOR EACH IMPROVED PROJECT)

APPLICANT:		DISASTER No.:
CATEGORY OF DAMAGE	PROJECT WORKSHEET NO.:	FEMA I. D. No.:
1. DESCRIPTION OF THE HIGHER GRADE FACILITY TO BE CONSTRUCTED OR ADDITIONAL PERMANENT REPAIRS TO BE ACCOMPLISHED. INCLUDE DIMENSIONS, TYPE OF MATERIALS, AND ANY OTHER DETAILS THAT PROVIDE A COMPLETE DESCRIPTION OF PROJECT.		
2. ESTIMATED COST OF THE ABOVE FACILITY \$		
3. SOURCE OF FUNDING OVER PUBLIC ASSISTANCE GRANT		
4. WORK TO BE PERFORMED BY: (Check only one) <input type="checkbox"/> a. CONTRACT <input type="checkbox"/> b. OWN EMPLOYEES AND EQUIPMENT <input type="checkbox"/> c. COMBINATION OF a. & b.		
5. ESTIMATED DATE THE ABOVE PERMANENT WORK WILL BE COMPLETED		
6. ESTIMATE OF THE COST OF REPAIR/REPLACEMENT AS SHOWN IN THE PROJECT W.S.		
7. AMOUNT REQUESTED FOR IMPROVED PROJECT \$ _____		
SIGNATURE OF APPLICANT'S AGENT		DATE OF REQUEST
APPROVAL OF THIS REQUEST IS BASED ON THE ABOVE INFORMATION. ANY CHANGED CONDITIONS MUST BE IMMEDIATELY REPORTED TO THE GOVERNOR'S AUTHORIZED REPRESENTATIVE.		
AMOUNT APPROVED AS AN IMPROVED PROJECT \$		
GOVERNOR'S AUTHORIZED REPRESENTATIVE		DATE OF APPROVAL