

PROJECT WORKSHEET CHECKLIST		
	Block	Content
PW HEADER INFORMATION	Disaster	<input type="checkbox"/> Example: FEMA- 1234 -DR- AL
	Project Number	<input type="checkbox"/> Provide unique number meeting Applicant and/or PAC format (7 digits or less)
	PA ID No. (FIPS #)	<input type="checkbox"/> Match Applicant Identification Number in NEMIS
	Date	<input type="checkbox"/> Indicate Date of Inspection (if several dates, select one and describe others in Scope of Work)
	Category	<input type="checkbox"/> Identify primary category of work
	Damaged Facility	<input type="checkbox"/> Indicate name of facility or type of work, duration, indicate if multiple sites
	Work Complete As Of	<input type="checkbox"/> Identify percent work complete as of specific date (percentage based on dollars of completed work divided by total dollars)
	Applicant	<input type="checkbox"/> Indicate name as included in NEMIS, do not abbreviate
	County / Parish	<input type="checkbox"/> Indicate county where work is to be performed, do not abbreviate
	Location	<input type="checkbox"/> Indicate street address, sector, city wide, indicate if multiple sites
DAMAGE DESCRIPTION	Latitude and Longitude	<input type="checkbox"/> Reference primary location (Format: xx.xxxxx, -xxx.xxxxx) <input type="checkbox"/> Include additional multiple locations in Damage Description and Damages
	Damage Description and Dimensions	<input type="checkbox"/> Describe the Cause of the Damage – hazard type(s), when occurred <input type="checkbox"/> Demonstrate the Applicant is responsible for the work <input type="checkbox"/> Describe the pre-disaster condition of the facility (design, function, capacity, active use, under construction) <input type="checkbox"/> Quantify specific disaster-related damages or emergency services needed <input type="checkbox"/> Describe ineligible damages, if observed <input type="checkbox"/> Reference Lat/Long location, if pertinent <input type="checkbox"/> Reference year of construction, if applicable <input type="checkbox"/> Refer to Narrative or Continuation Sheet, if provided <input type="checkbox"/> Reference Location Plans, Sketches, Photographs, Other Supporting Documentation

SCOPE OF WORK	Scope of Work	<input type="checkbox"/> Separate Work Completed from Work to be Completed <input type="checkbox"/> Describe the work in quantifiable (length, width, height, depth, capacity) and descriptive (brick, wood, asphalt) terms <input type="checkbox"/> Work Complete: costs based on actuals, note dates work performed, who performed work (ie, force account or contractor) <input type="checkbox"/> Work to be Completed: note source of estimated costs (RS Means, cost codes, proposal, etc), if emergency work...estimated date of completion, who will perform work (ie force account, contract, etc.) <input type="checkbox"/> Organize scope items consistent with Damage Description and differentiate between types of damages/costs for insurance purposes (ie, flood vs. wind) <input type="checkbox"/> Describe the work necessary to remove and dispose of disaster-related debris, conduct emergency response measures, or repair or replace the disaster-damaged facility to pre-disaster condition <input type="checkbox"/> Provide all design assumptions, methods of repair, and calculations to support the work <input type="checkbox"/> <input type="checkbox"/> Describe any work that will restore a facility beyond its pre-disaster condition (required by Codes and Standards, per Hazard Mitigation Proposal, Replacement Projects, Alternate Projects, Improved Projects, Relocation Projects) <input type="checkbox"/> Describe any Special Considerations that affect the Scope of Work or Cost Estimate <input type="checkbox"/> Document ineligible work and associated costs <input type="checkbox"/> If other PWs have been prepared for the same facility, reference those PWs <input type="checkbox"/> Describe the basis for the cost estimate (how the work was or will be performed, methodology used to develop costs, reasonableness of costs, procurement method for work by contract) <input type="checkbox"/> Make sure work items, dimensions, and quantities match those provided in the Damage Description, the Project Costs, and all sketches and calculations. Any discrepancies require explanation <input type="checkbox"/> If portions of the Applicant's claim are not eligible, reference FEMA policy <input type="checkbox"/> Refer to Narrative or Continuation Sheet, if provided <input type="checkbox"/> Reference Location Plans, Sketches, Photographs, Other Supporting Documentation
	Four Questions	<input type="checkbox"/> Indicate responses consistent with information provided on the Special Considerations Questions form
	Project Cost	<input type="checkbox"/> Separate Work Completed from Work to be Completed <input type="checkbox"/> Provide line item for all work items in Scope of Work <input type="checkbox"/> Appropriate cost code and unit price reference is used <input type="checkbox"/> Refer to CEF documentation, if used <input type="checkbox"/> Refer to the Cost Estimate Continuation Sheet, if provided
	Project Cost – Force	<input type="checkbox"/> Type of Labor (overtime, regular time, temp hires,

	Account	volunteer, prison labor, etc.) <input type="checkbox"/> Describe pay policy <input type="checkbox"/> Perform a 20% sampling of documentation for verification of costs claimed and note findings in PW
	Project Cost – Contracted Costs	<input type="checkbox"/> Contract Type (Lump Sum, Unit Price, Time and Materials, Cost Plus Percentage of Cost, Mater Services Agreement) <input type="checkbox"/> Review procurement policy <input type="checkbox"/> Describe bid process or sole source <input type="checkbox"/> Comment on contract issues and state that the PW is subject to further review. <input type="checkbox"/> Perform a reasonable cost analysis.
	Prepared By	<input type="checkbox"/> Name, title, and signature provided
	Applicant Rep.	<input type="checkbox"/> Name, title, and signature provided
	Special Considerations Questions	<input type="checkbox"/> Identify any known or potential Special Considerations issues identified during discussion with the Applicant or observation at the site <input type="checkbox"/> Explain the response of “Yes” or “Unsure”, or “No” if needed <input type="checkbox"/> Notify the PAC or JFO if a Specialist is needed for resolution

DOCUMENTATION	<p>Supporting Documentation, as applicable to project</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Special Considerations Page <input type="checkbox"/> Site Location Map <input type="checkbox"/> Flood Insurance Rate Map (FIRM) <input type="checkbox"/> Photographs of site, overall facility, specific damages, and conditions that demonstrate the presence of an immediate threat (if applicable) <input type="checkbox"/> Photographs of work completed, if any <input type="checkbox"/> Drawing, sketches and plans of pre-disaster facility design (to scale) <input type="checkbox"/> Drawings and sketches of disaster-related damages (to scale) <input type="checkbox"/> Drawings and sketches of the completed or proposed repair (to scale) <input type="checkbox"/> Calculation sheet detailing specific dimensions and quantities of damage, and specific dimensions and quantities of work items <input type="checkbox"/> Engineering / Technical Reports <input type="checkbox"/> Engineering Specifications for repair (such as Department of Public Works (DPW) standard design drawings) <input type="checkbox"/> Applicable codes and standards <input type="checkbox"/> Lease agreements for leased properties 	<ul style="list-style-type: none"> <input type="checkbox"/> Facility maintenance records (such as for roads, engineered channels, debris basins, and other facilities requiring maintenance to ensure proper function) <input type="checkbox"/> Facility inspection / safety reports (such as may be available for bridges and dams) <input type="checkbox"/> Relevant correspondence or information received from the Applicant or State <input type="checkbox"/> Relevant correspondence or information received from alternate funding agencies <input type="checkbox"/> Hazard Mitigation Proposal <input type="checkbox"/> 50% rule calculations <input type="checkbox"/> Justification for request of a relocation project, improved, or alternate project, including details of the proposed project <input type="checkbox"/> Insurance policies <input type="checkbox"/> Hazard mitigation proposals <input type="checkbox"/> Documents supporting compliance with environmental or historic preservation issues <input type="checkbox"/> Contracts or contractor bids <input type="checkbox"/> Mutual aid agreements <input type="checkbox"/> Rental agreements <input type="checkbox"/> Invoices / Receipts <input type="checkbox"/> Time/equipment records (if applicable) <input type="checkbox"/> Fringe Benefit Calculation Sheet (Force Account) <input type="checkbox"/> Cost Estimating Format Spreadsheets
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