LOCAL MATCH COMMITMENT LETTER

<MM-DD-YY>
<Company/Jurisdiction Name>
<Address Line 1>
<Address Line 2>
<City, State, Zip Code>

Re: <DR-XXXX-PJ/PLXXXX> Subapplication Local Match Commitment Letter

Dear State Hazard Mitigation Officer:

As part of the Hazard Mitigation Assistance Program process, a local match funding commitment is required. This letter serves as <name of subapplicant>’s commitment to meet the local match fund requirements for the <Pre-Disaster Mitigation (PDM) Program/Flood Mitigation Assistance (FMA) program>.

<table>
<thead>
<tr>
<th>Source of Local Match Commitment Funds:</th>
<th>Local Agency Funding</th>
<th>Other Agency Funding</th>
<th>Private Nonprofit Funding</th>
<th>State Agency Funding</th>
</tr>
</thead>
</table>

Name of Local Match Commitment Funding Source:

Funds Availability Date:

Provide exact MM/DD/YYYY of availability of funds.

Requested Federal Share: $

Must match $ amount provided in subapplication.

Local Match Commitment: $

Refer to Table 2 (p. 27) of the HMA Guidance.

Funding Type:

Examples: administration, cash, consulting fees, force account labor, program income, etc.

If additional federal funds are requested, an additional local match commitment letter will be required.

Please contact <Name of Contact> at <Phone Number and Email> with questions.

Sincerely,

<Add Signature of Authorized Agent>

<First and Last Name of Authorized Agent>
>Title>
<Phone>
<Fax>
<Email>