**PROJECT MAINTENANCE LETTER**

|  |
| --- |
| <DATE> |

|  |
| --- |
| <COMPANY NAME> |
| <ADDRESS LINE 1> |
| <ADDRESS LINE 2> |
| <CITY, STATE, ZIP> |

|  |  |
| --- | --- |
| RE: | <INSERT DISASTER NUMBER HERE> Project Subapplication |

Dear State Hazard Mitigation Officer:

This is to confirm that <NAME OF SUBAPPLICANT> is committed to perform the necessary maintenance for the entire useful life of this project (# OF YEARS) once completed. The <NAME OF ENTITY RESPONSIBLE> is allocating an annual budget of <AMOUNT> which will allow maintenance to occur as needed to ensure the <PROJECT BUILDING/FACILITY> remains in good repair and operational.

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| **ENTITY RESPONSIBLE FOR THE MAINTENANCE:** |       |
|  | Example: City of Townsville |

|  |  |
| --- | --- |
| **PAST MAINTENANCE TASKS INVOLVED:** |       |
| Explain the maintenance cost before mitigation and explain what the maintenance activities included in the past. |

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| **FUTURE MAINTENANCE TASKS INVOLVED:** |       |
| Explain the maintenance cost after mitigation and explain what the maintenance activities will include in the future. |

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| **FUTURE MAINTENANCE SCHEDULE:**  |       |
|  | Example: Annually |

|  |  |
| --- | --- |
| **FUTURE COST OF MAINTENANCE:** |       |
|  | Example: $10,000.00 |

|  |  |
| --- | --- |
| **SOURCE OF FUTURE MAINTENANCE FUNDS:** |       |
|  | Example: Flood Control Funds |

Please contact <NAME OF CONTACT> with questions.

Sincerely,

<ADD SIGNATURE HERE OF AUTHORIZED AGENT>

|  |
| --- |
| <FIRST AND LAST NAME OF AUTHORIZED AGENT> |
| <TITLE> |
| <PHONE> |
| <FAX> |
| <EMAIL> |