

Application for Federal Assistance SF-424

*** 1. Type of Submission:**

- ☐ Preapplication
☒ Application
☐ Changed/Corrected Application

*** 2. Type of Application:**

- ☒ New
☐ Continuation
☐ Revision

*** If Revision, select appropriate letter(s):**

*** Other (Specify):**

*** 3. Date Received:**

05/23/2023

4. Applicant Identifier:

5a. Federal Entity Identifier:

5b. Federal Award Identifier:

State Use Only:

6. Date Received by State:

7. State Application Identifier:

8. APPLICANT INFORMATION:

*** a. Legal Name:**

Williamson County

*** b. Employer/Taxpayer Identification Number (EIN/TIN):**

74-6000978

*** c. Organizational DUNS:**

0769300490000

d. Address:

*** Street1:**

911 Tracy Chambers Lane

Street2:

*** City:**

Georgetown

County/Parish:

*** State:**

TX: Texas

Province:

*** Country:**

USA: UNITED STATES

*** Zip / Postal Code:**

78626-0000

e. Organizational Unit:

Department Name:

Williamson County

Division Name:

Office of Emergency Management

f. Name and contact information of person to be contacted on matters involving this application:

Prefix:

*** First Name:**

Cassandra

Middle Name:

*** Last Name:**

Edwards

Suffix:

Title:

Emergency Management Specialist

Organizational Affiliation:

Williamson County

*** Telephone Number:**

512-688-0526

Fax Number:

512-864-8227

*** Email:**

cassandra.edwards@wilco.org

Application for Federal Assistance SF-424

* 9. Type of Applicant 1: Select Applicant Type:

B: County Government

Type of Applicant 2: Select Applicant Type:

Type of Applicant 3: Select Applicant Type:

* Other (specify):

* 10. Name of Federal Agency:

US Department of Housing and Urban Development

11. Catalog of Federal Domestic Assistance Number:

CFDA Title:

* 12. Funding Opportunity Number:

FR-6109-N-02-CDBG-MIT

* Title:

CDBG-MIT - Local Hazard Mitigation Grant Program

13. Competition Identification Number:

Title:

14. Areas Affected by Project (Cities, Counties, States, etc.):

Add Attachment

Delete Attachment

View Attachment

* 15. Descriptive Title of Applicant's Project:

Williamson County Multi-Jurisdictional Hazard Mitigation Action Plan Update

Attach supporting documents as specified in agency instructions.

Add Attachments

Delete Attachments

View Attachments

Application for Federal Assistance SF-424**16. Congressional Districts Of:**

* a. Applicant TX-31

* b. Program/Project TX-35

Attach an additional list of Program/Project Congressional Districts if needed.

Add Attachment

Delete Attachment

View Attachment

17. Proposed Project:

* a. Start Date: 05/23/2023

* b. End Date: 05/23/2026

18. Estimated Funding (\$):

* a. Federal	76,500.00
* b. Applicant	
* c. State	
* d. Local	
* e. Other	
* f. Program Income	
* g. TOTAL	76,500.00

*** 19. Is Application Subject to Review By State Under Executive Order 12372 Process?**

- ☐ a. This application was made available to the State under the Executive Order 12372 Process for review on
- ☐ b. Program is subject to E.O. 12372 but has not been selected by the State for review.
- ☒ c. Program is not covered by E.O. 12372.

*** 20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes," provide explanation in attachment.)**☐ Yes ☒ No

If "Yes", provide explanation and attach

Add Attachment

Delete Attachment

View Attachment

21. *By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)

☒ ** I AGREE

** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.

Authorized Representative:

Prefix: Mr. * First Name: Bill

Middle Name:

* Last Name: Gravell

Suffix: Jr.

* Title: Williamson County Judge

* Telephone Number: 512-943-1550

Fax Number: 512-943-1662

* Email: ctyjudge@wilco.org

* Signature of Authorized Representative:

Bill Gravell Jr.
Bill Gravell Jr. (Jun 28, 2023 10:21 CDT)

* Date Signed: 06.24.2023