



ARKANSAS DEPARTMENT OF EMERGENCY MANAGEMENT
SAFE ROOM/SHELTER APPLICATION

Fill in ALL spaces. Spaces left blank will result in the application being returned to you. This will delay the application process.

Part I -Homeowner Information (can be only one (1) individual and SSN#)

Full Name Required SS#

Mailing Address: City Zip

Physical Address of Shelter

Phone# Cost of Shelter Installation

Do you own your home? Yes No

Is it your Primary Residence? Yes No

Type of Installation: Safe Room Underground Shelter

FUNDS ARE NOT GUARANTEED

I understand the following:

- A. The safe room/shelter must have been installed after January 21, 1999.
B. Safe room installation must meet standards in FEMA publication #320 and all state, city and county codes.
C. The stipend will be \$1,000 or 50% of the cost, whichever is less.
D. Labor by homeowner can not be reimbursed.

Homeowner's Signature Date

Upon completion of structure, call your County Coordinator (located at your County Courthouse) to complete the verification portion of this application.

Part II -Verification:

Coordinator Name: Shelia Maxwell County Faulkner

Address 801 Locust Conway, AR 72034
City Zip

Phone (501) 450-4935

I certify the installation of the safe room/in-ground shelter, located at the address in Part I has been completed, and meets all city and county codes.

Coordinator Signature Date

Disclaimer: Neither ADEM or the verification official (County Coordinator/representative) guarantees the safety of the shelter, in regards to quality of materials nor installation, only that installation has been completed and meets the requirements for reimbursement through the ADEM Safe Room/Shelter Program.

Address: ADEM, Mitigation Dept., Building #9501, Camp Joseph T. Robinson, North Little Rock, AR 72199-9600