

Instructions for Completing the East Baton Rouge Parish Voluntary Participation Agreement (VPA)

- Please understand "?" or "N/A" are **not** acceptable answers. **All** blanks must be filled out.
- If you do not receive mail at the property address, please be sure to provide a mailing address.
- Under the section "**PROPERTY INFORMATION:**" This section is only for flood insurance. **DO NOT** use information from Homeowner's Insurance, Renter's Insurance, etc. to fill out these blanks.
- Tax Parcel #: This is the number associated with your property tax. If you do not have this information available, please contact the East Baton Rouge Parish Assessor's Office at (225) 389-3920.
- Year of Construction: This is the year the home was constructed.
- Number of Stories above ground: Number of stories of the home.
- Total Living Area in Sq. Ft.: This is the square footage located under roof.
- Estimate the Fair Market Value of your home: Do not be intimidated, you will not be liable for your answer. This is just an estimate.
- The first line in the signature box reads: "I understand that the elevation of this property under the Hazard Mitigation Grant Program's Elevation " This is just a statement explaining the program is voluntary in nature. This does not mean you are signing the form giving permission to elevate your home. The form must be signed by the Property Owner and Co-Owner; otherwise it will not be accepted.
- Attachments: If you have any of the following available, please include them with your form:
 - Elevation Certificate
 - Declarations Page (Proof of Flood Insurance)
 - Proof of Loss for previous floods (If applicable)
 - Letter of Substantial Damage (This can be applied for at the East Baton Rouge Parish Permit Office, 300 North Tenth Street, Baton Rouge, LA 70802)
- Original Form must be mailed to or delivered to: MOHSEP, 3773 Harding Blvd., Baton Rouge, LA 70807 ATTN: Hazard Mitigation or email to MOHSEPHM@brla.gov.
- If you have any questions, you may contact our office at (225) 389-2100 or MOHSEPHM@brla.gov.

Voluntary Participation Agreement

FEMA Hazard Mitigation Grant Program (HMGP) or Flood Mitigation Assistance (FMA)

ELEVATION

(Separate forms needed for each property owned, including Vacant Lots if on separate deed)

Property Owner: _____ Social Security #: _____

(Co-Owner's Full Name): _____ Social Security #: _____

Phone #: () _____ Work #: () _____ Cell #: () _____

Property Address: _____
(To be elevated) _____

Mailing Address: (If different)

E-Mail : _____

PROPERTY INFORMATION- At time of Flood Body of water causing Flooding: _____

Do you currently have Flood Insurance? Yes No Insurance Company: _____

Flood Insurance Policy #: _____

Have you filed claims in last 10 years? Y N ICC? Y N Is home substantially damaged? Y N

Property: At time of flood (Circle) **Type Home:** **Foundation Type:** **Type Structure:**

Owner Occupied-Primary	Single Family	Basement Y N	Outside Entrance Y N	Wood
Owner Occupied- Secondary	2-4 Family	Finished Y N	Partial Y N	Masonry (Brick)
Rental	Multi (5+)	Crawl Space Y N		Stone
Vacant Lot	Manufactured	Elevated on piers/columns/posts/piles		Cement
Other (Explain)	Vacant Land	Slab on Grade		Other _____
_____	Other (Explain)	Vacant Land		
		Other (Explain) _____		

If Rented now, please provide name, address, and phone number of renter (use extra pages as needed)

TAX Parcel #: _____ Year of Construction: _____ Number of Stories above ground: _____

Total Living Area in Sq Ft. (All floors) _____ Estimate the Fair Market Value of your home: \$ _____

****If you have an elevation certificate, please attach a copy with this form****

Flood and Damage History-use extra pages as needed:

Date: _____ Damage \$'s: _____ Date: _____ Damage \$'s: _____
Date: _____ Damage \$'s: _____ Date: _____ Damage \$'s: _____

I understand that the elevation of this property under the Flood Mitigation Assistance Grant Program's Elevation Component is voluntary in nature, and that I am under NO obligation to participate, and that I may drop out of the program at any time.

I currently plan to participate in the voluntary property elevation program.

Print Name(s) of Property Owner(s) _____

Signature: _____ Date: _____

Co-Owner's Signature (if applicable) _____