LOCAL MATCH COMMITMENT LETTER

<MM-DD-YYYY>

<Company/Jurisdiction Name>
<Address Line 1>
<City, State Zip Code>

Hazard Mitigation Assistance (HMA) Sub-application Local Match Commitment Letter – <Project Title>

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 <sub-applicant>'s commitment to meet the local match fund requirements for this grant.

Source of Local Match Commitment Funds:	Local Agency Funding ☐	Other Agency Funding ☐	Private Nonprofit Funding ☐	State Agency Funding ☐
Name of Local Match Commitment Funding Source:	Financial Match Source(s): <list the amount(s) and identify the source(s) of funding for non-federal match> In-Kind Match Source(s): <list the amount(s) and identify the source(s) of in-kind match>			
Fund Availability:	Date Funds will be Available: <identify the date of funding availability>			

If more than one funding source, list all entities and include amount for each. Example:
• Applicant's Name: $10,000
• Property Owner Name: $4,500

Total Project Cost:	$
Requested Federal Share (75%):	$
Local Match Commitment (25%):	$

We understand that in order for match to be accepted, it must be allowable, reasonable, allocable, consistently applied, and included in the approved budget. We are aware that appropriate documentation is required to record

the cost match being provided. The records of all cash and in-kind contributions, including volunteer time will be documented.

We are aware that none of the cash or in-kind contributions can be paid from a federally funded source (including salaries) or currently being utilized as a cost match toward another federal grant.

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>
<Email>