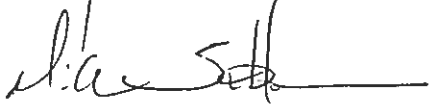



<b>State of Alaska</b> <b>Division of Homeland Security and Emergency Management</b> Under US Department of Commerce National Oceanic and Atmospheric Administration						Page 1 of 6	
						FEDERAL AWARD DATE	
						August 19, 2016	
						FEDERAL GRANT PROGRAM	
						2016 NOAA Tsunami Hazard Mitigation Program	
<b>OBLIGATING AWARD DOCUMENT</b>						FEDERAL GRANT NUMBER	
						NA16NWS4670030	
RECIPIENT NAME AND ADDRESS		PERFORMANCE PERIOD		AMENDMENT		CFDA: 11.467	
Petersburg Borough PO Box 329 Petersburg, AK 99833		FROM:	October 01, 2016	AMENDMENT #:		AWARD AMOUNT	
		TO:	December 31, 2017	EFFECTIVE DATE:			
		STATE PROGRAM NUMBER				20NOAA-GY16	
DUNS NUMBER	040194276		FUNDING ALLOCATION				
EIN	92-6000142		PLANNING		EXERCISE		
METHOD OF PAYMENT	Electronic		TRAINING		EQUIPMENT	\$56,000.00	
PURPOSE OF AWARD							
The attached Project Budget Details Report is the funding allocation. Grant program guidelines and federal, state, and local contracting and procurement compliance requirements apply.							
GRANT REQUIREMENTS AND PROGRAM TERMS AND CONDITIONS							
The acceptance of a grant from the United States government creates a legal duty on the part of the recipient to use the funds or property made available in accordance with the conditions of the grant. [GAO Accounting Principles and Standards for Federal Agencies, Chapter 2, Section 16.8(c)] See attached for continued Grant Requirements and Program Terms and Conditions							
SPECIAL CONDITIONS (Grant funds cannot be expended until these conditions have been met. See Obligating Award for details)							
None							
AGENCY INFORMATION							
ADDRESS	Division of Homeland Security and Emergency Management PO Box 5750 JBER, AK 99505-5750			WEBSITE	http://ready.alaska.gov		
				EMAIL	mva.grants@alaska.gov		
				PHONE	907-428-7000		
				FAX	907-428-7009		
STATE PROJECT MANAGER		PHONE	FAX	EMAIL			
Dan Belanger		907-428-7034	907-428-7009	dan.belanger@alaska.gov			
AGENCY APPROVAL							
NAME AND TITLE OF APPROVING AGENCY OFFICIAL				NAME AND TITLE OF AUTHORIZED RECIPIENT OFFICIAL			
Michael J. Sutton, Deputy Director				Stephen Giesbrecht, City Manager			
SIGNATURE OF APPROVING AGENCY OFFICIAL				SIGNATURE OF AUTHORIZED RECIPIENT OFFICIAL			
			DATE				DATE
			10/31/16				
FOR STATE USE ONLY							
Division File Number:		16 NOAA 1.6.19.1		Date Returned			
Fund	Unit	AR Unit	Object	Activity	Function	Program	PPC
1004	2001	090000200	7001	2012	16 NOAA PBG	2NOAA2016	GYNOAA