

# NOTICE OF OFFICE OF MANAGEMENT AND BUDGET ACTION

Date 09/07/2018

Department of Commerce  
National Oceanic and Atmospheric Administration

FOR CERTIFYING OFFICIAL: Rod Turk  
FOR CLEARANCE OFFICER: Jennifer Jessup

In accordance with the Paperwork Reduction Act, OMB has taken action on your request received 05/25/2018

ACTION REQUESTED: Revision of a currently approved collection

TYPE OF REVIEW REQUESTED: Regular

ICR REFERENCE NUMBER: 201804-0648-012

AGENCY ICR TRACKING NUMBER:

TITLE: STORMREADY® , TSUNAMIREADY, TSUNAMIREADY SUPPORTER, AND STORMREADY®  
SUPPORTER APPLICATION FORMS

LIST OF INFORMATION COLLECTIONS: See next page

OMB ACTION: Approved with change

OMB CONTROL NUMBER: 0648-0419

The agency is required to display the OMB Control Number and inform respondents of its legal significance in accordance with 5 CFR 1320.5(b).

EXPIRATION DATE: 09/30/2021

DISCONTINUE DATE:

BURDEN:	RESPONSES	HOURS	COSTS
Previous	305	545	118
New	285	525	26
Difference			
Change due to New Statute	0	0	0
Change due to Agency Discretion	0	0	0
Change due to Agency Adjustment	-20	-20	-92
Change due to PRA Violation	0	0	0

TERMS OF CLEARANCE:

OMB Authorizing Official: Neomi Rao  
Administrator,  
Office Of Information And Regulatory Affairs

## List of ICs

IC Title	Form No.	Form Name	CFR Citation
StormReady and TsunamiReady Applications	NA, NA	TsunamiReady application from, StormReady application form	
StormReady Supporter Application Form	NA	StormReady Supporter Application	
TsunamiReady Supporter Application	NA	TsunamiReady Supporter Application	

# PAPERWORK REDUCTION ACT SUBMISSION

**Please read the instructions before completing this form. For additional forms or assistance in completing this form, contact your agency's Paperwork Clearance Officer. Send two copies of this form, the collection instrument to be reviewed, the supporting statement, and any additional documentation to: Office of Information and Regulatory Affairs, Office of Management and Budget, Docket Library, Room 10102, 725 17th Street NW, Washington, DC 20503.**

1. Agency/Subagency originating request	2. OMB control number <span style="float: right;">b. <input type="checkbox"/> None</span> a. _____ - _____
3. Type of information collection ( <i>check one</i> ) a. <input type="checkbox"/> New Collection b. <input type="checkbox"/> Revision of a currently approved collection c. <input type="checkbox"/> Extension of a currently approved collection d. <input type="checkbox"/> Reinstatement, without change, of a previously approved collection for which approval has expired e. <input type="checkbox"/> Reinstatement, with change, of a previously approved collection for which approval has expired f. <input type="checkbox"/> Existing collection in use without an OMB control number For b-f, note Item A2 of Supporting Statement instructions	4. Type of review requested ( <i>check one</i> ) a. <input type="checkbox"/> Regular submission b. <input type="checkbox"/> Emergency - Approval requested by _____ / _____ / _____ c. <input type="checkbox"/> Delegated
7. Title	5. Small entities Will this information collection have a significant economic impact on a substantial number of small entities? <input type="checkbox"/> Yes <input type="checkbox"/> No
8. Agency form number(s) ( <i>if applicable</i> )	6. Requested expiration date a. <input type="checkbox"/> Three years from approval date b. <input type="checkbox"/> Other Specify: _____ / _____
9. Keywords	10. Abstract
11. Affected public ( <i>Mark primary with "P" and all others that apply with "x"</i> ) a. ___ Individuals or households d. ___ Farms b. ___ Business or other for-profit e. ___ Federal Government c. ___ Not-for-profit institutions f. ___ State, Local or Tribal Government	12. Obligation to respond ( <i>check one</i> ) a. <input type="checkbox"/> Voluntary b. <input type="checkbox"/> Required to obtain or retain benefits c. <input type="checkbox"/> Mandatory
13. Annual recordkeeping and reporting burden a. Number of respondents _____ b. Total annual responses _____ 1. Percentage of these responses collected electronically _____ % c. Total annual hours requested _____ d. Current OMB inventory _____ e. Difference _____ f. Explanation of difference 1. Program change _____ 2. Adjustment _____	14. Annual reporting and recordkeeping cost burden ( <i>in thousands of dollars</i> ) a. Total annualized capital/startup costs _____ b. Total annual costs (O&M) _____ c. Total annualized cost requested _____ d. Current OMB inventory _____ e. Difference _____ f. Explanation of difference 1. Program change _____ 2. Adjustment _____
15. Purpose of information collection ( <i>Mark primary with "P" and all others that apply with "X"</i> ) a. ___ Application for benefits e. ___ Program planning or management b. ___ Program evaluation f. ___ Research c. ___ General purpose statistics g. ___ Regulatory or compliance d. ___ Audit	16. Frequency of recordkeeping or reporting ( <i>check all that apply</i> ) a. <input type="checkbox"/> Recordkeeping b. <input type="checkbox"/> Third party disclosure c. <input type="checkbox"/> Reporting 1. <input type="checkbox"/> On occasion 2. <input type="checkbox"/> Weekly 3. <input type="checkbox"/> Monthly 4. <input type="checkbox"/> Quarterly 5. <input type="checkbox"/> Semi-annually 6. <input type="checkbox"/> Annually 7. <input type="checkbox"/> Biennially 8. <input type="checkbox"/> Other (describe) _____
17. Statistical methods Does this information collection employ statistical methods <input type="checkbox"/> Yes <input type="checkbox"/> No	18. Agency Contact (person who can best answer questions regarding the content of this submission)  Name: _____ Phone: _____

## 19. Certification for Paperwork Reduction Act Submissions

On behalf of this Federal Agency, I certify that the collection of information encompassed by this request complies with 5 CFR 1320.9

**NOTE:** The text of 5 CFR 1320.9, and the related provisions of 5 CFR 1320.8(b)(3), appear at the end of the instructions. *The certification is to be made with reference to those regulatory provisions as set forth in the instructions.*

The following is a summary of the topics, regarding the proposed collection of information, that the certification covers:

- (a) It is necessary for the proper performance of agency functions;
- (b) It avoids unnecessary duplication;
- (c) It reduces burden on small entities;
- (d) It used plain, coherent, and unambiguous terminology that is understandable to respondents;
- (e) Its implementation will be consistent and compatible with current reporting and recordkeeping practices;
- (f) It indicates the retention period for recordkeeping requirements;
- (g) It informs respondents of the information called for under 5 CFR 1320.8(b)(3):
  - (i) Why the information is being collected;
  - (ii) Use of information;
  - (iii) Burden estimate;
  - (iv) Nature of response (voluntary, required for a benefit, mandatory);
  - (v) Nature and extent of confidentiality; and
  - (vi) Need to display currently valid OMB control number;
- (h) It was developed by an office that has planned and allocated resources for the efficient and effective management and use of the information to be collected (see note in Item 19 of instructions);
- (i) It uses effective and efficient statistical survey methodology; and
- (j) It makes appropriate use of information technology.

If you are unable to certify compliance with any of the provisions, identify the item below and explain the reason in Item 18 of the Supporting Statement.

Signature of Senior Official or designee

Date

Agency Certification (signature of Assistant Administrator, Deputy Assistant Administrator, Line Office Chief Information Officer, head of MB staff for L.O.s, or of the Director of a Program or StaffOffice)

Signature

Date

Signature of NOAA Clearance Officer

Signature

Date

**SUPPORTING STATEMENT**  
**STORMREADY<sup>®</sup>, TSUNAMIREADY<sup>®</sup>, TSUNAMIREADY<sup>®</sup> SUPPORTER, AND**  
**STORMREADY<sup>®</sup> SUPPORTER APPLICATION FORMS**  
**OMB CONTROL NO. 0648-0419**

**A. JUSTIFICATION**

This request is for extension of a currently approved information collection.

**1. Explain the circumstances that make the collection of information necessary.**

This information collection supports Public Law 115-25, the [Tsunami Warning Education, and Research Act](#) (U.S.C. 33 Chapter 45) specifically Section 3204, which describes the development of a “community-based tsunami hazard mitigation program to improve tsunami preparedness of at-risk areas in the United States and its territories.”

The National Weather Service (NWS) established the StormReady program in 1999 and the TsunamiReady program in 2002 to help counties, cities and towns implement procedures to reduce the potential for weather-related and tsunami hazards. By participating in this program, local agencies earn recognition for their jurisdiction by meeting guidelines established by the NWS in partnership with federal, state, and local emergency management professionals. Information and details on the StormReady and TsunamiReady programs are located at <https://www.weather.gov/stormready/> and <https://www.weather.gov/tsunamiready/>.

Many businesses, schools, nonprofit organizations and other non-governmental entities establish severe weather safety plans and actively promote severe weather safety awareness activities. The NWS established the StormReady and TsunamiReady Supporter programs to recognize those entities do not have the resources necessary to fulfill all the full StormReady or TsunamiReady eligibility but actively promote the principles of the programs.

**2. Explain how, by whom, how frequently, and for what purpose the information will be used. If the information collected will be disseminated to the public or used to support information that will be disseminated to the public, then explain how the collection complies with applicable NOAA Information Quality Guidelines.**

StormReady/TsunamiReady are voluntary programs that provide guidance and incentive to officials interested in improving their hazardous weather operations. Jurisdictions use the application to apply for initial StormReady/ TsunamiReady recognition. Full StormReady/ TsunamiReady renewals occur every six years, at which time communities complete the application form again. The government will use the information collected by the StormReady/TsunamiReady application to determine whether a community has met all of the guidelines to receive StormReady/TsunamiReady recognition.

Recognition as StormReady/TsunamiReady entitles a community to the following benefits:

1) one StormReady/TsunamiReady identification sign; 2) authorization to use the StormReady/ TsunamiReady logos; 3) instructions for acquiring additional identification signs; 4) information

concerning the notification of the National Flood Insurance Program for possible adjustment to insurance rates; and 5) inclusion on the national StormReady/TsunamiReady Website and map.

Each question asked on the application helps to determine if the applying jurisdiction meets the guidelines required to become StormReady or TsunamiReady. Specifically:

### **StormReady**

**Guideline 1: Community Information.** Requests the primary and secondary points of contact for the jurisdiction and identifies the location of the 24-hour warning point and Emergency Operations Center. NWS must have this information to verify the person and place responsible for the information.

**Guideline 2: NWS Information Reception Equipment.** This information identifies the number, type and location of redundant reception equipment a jurisdiction has in place to receive critical NWS weather information.

**Guideline 3: Local Weather & Water Monitoring Equipment.** Verifies the number, type and location of redundant weather and monitoring equipment used by the jurisdiction.

**Guideline 4: Local Warning Dissemination.** Identifies the type, number and location of redundant warning systems used by the jurisdiction to disseminate weather information to the public.

**Guideline 5: Community Preparedness.** Details specific community education and preparedness activities in terms of hazardous weather.

**Guideline 6: Administrative/Record Keeping.** Provides details /dates on how the jurisdiction and the NWS administer the program and keep information updated.

StormReady Supporter is a voluntary program offered to provide guidance and incentive to entities that strive to improve their respective hazardous weather operations. Entities will use the application to apply for a one-time StormReady Supporter recognition. The government will use the information collected by the StormReady Supporter application to determine whether an entity has met the necessary guidelines to receive StormReady Supporter recognition.

Recognition as StormReady Supporter participant entitles an entity to the following benefits: 1) a StormReady Supporter certificate; 2) authorization to use the StormReady logo; 3) instructions for acquiring identification signs; and 4) inclusion on the StormReady Supporter Website at <http://www.stormready.noaa.gov/supporter.htm> .

StormReady Supporter guidelines are less extensive and detailed than the full StormReady recognition. Unlike the full StormReady recognition, StormReady Supporter guidelines are not based on the size of the population and not subject to renewal every three years. The guidelines on the application help to determine if the applying entity meets the requirements necessary to become a StormReady Supporter.

## **TsunamiReady**

Community Information. Requests the primary and secondary points of contact for the jurisdiction and identifies the location of the 24-hour warning point and Emergency Operations Center (EOC). NWS must have this information to verify the person and place responsible for the information.

Mitigation Guidelines: requests information on mapped tsunami hazard zones for emergency management planning; how tsunami hazard and community vulnerability information in FEMA-approved multi-hazard mitigation plan are indicated; and information about signage that identifies tsunami danger area and/or hazard zone (entering and leaving tsunami zone signs), evacuation routes, and assembly areas.

Preparedness Guidelines: requests information about tsunami evacuation maps; ongoing tsunami public education efforts including in public schools; community-wide outreach or education activities; and community exercises and drills that reinforce these concepts.

Response Guidelines: ensures that tsunami hazards are addressed in the community's emergency operations plan (EOP) including for public schools; and supports the EOC during tsunami incidents if an EOC is opened and activated.

TsunamiReady Supporter is a voluntary program offered to provide guidance and incentive to entities that strive to improve their respective tsunami preparedness activities. Entities will use the application to apply for a one-time TsunamiReady Supporter recognition. The government will use the information collected by the TsunamiReady Supporter application to determine whether an entity has met the necessary guidelines to receive TsunamiReady Supporter recognition.

Recognition as TsunamiReady Supporter participant entitles an entity to the following benefits: 1) a TsunamiReady Supporter certificate; 2) authorization to use the TsunamiReady logo; 3) instructions for acquiring identification signs; and 4) inclusion on the TsunamiReady Supporter Website at <https://www.weather.gov/tsunamiready/supporters>

TsunamiReady Supporter guidelines are less extensive and detailed than the full TsunamiReady recognition. Unlike the full TsunamiReady recognition, TsunamiReady Supporter guidelines are not subject to renewal every three years. The guidelines on the application help to determine if the applying entity meets the requirements necessary to become a TsunamiReady Supporter.

None of the information on the application is distributed to the public. The only information made public is the name of the recognized community and the date of its recognition. The information is disseminated to the public via the Internet and complies with applicable NOAA Information Quality Guidelines:

Utility. Each newly recognized site is added to a graphical map of the U.S. located on the StormReady Web site ([www.stormready.noaa.gov](http://www.stormready.noaa.gov)). Posting the information on the Web site provides the communities with public recognition of their status and enables the public to see

what communities are recognized as AStormReady/TsunamiReady@. It also keeps an accurate, up-to-date count of the number of recognized communities.

Integrity. The procedures for recognizing a community as StormReady/TsunamiReady adhere to OMB Circular A-130. The Website is updated as each new community is recognized. The Webmaster is the only person authorized to make any changes to the site. Procedures for getting the communities recognized and posted on the Website are outlined in NWS Directives.

Objectivity. The recognitions are verified by the NWS field official who provides the name of the jurisdiction and date of recognition to the program manager and the Webmaster.

NOAA NWS will retain control over the information and safeguard it from improper access, modification, and destruction, consistent with NOAA standards for confidentiality, privacy, and electronic information. The information collection is designed to yield data that meet all applicable [information quality guidelines](#).

**3. Describe whether, and to what extent, the collection of information involves the use of automated, electronic, mechanical, or other technological techniques or other forms of information technology.**

The StormReady, TsunamiReady, StormReady Supporter and TsunamiReady Supporter application forms are available in Word and fillable PDF format via the Internet at <https://www.weather.gov/stormready/become> or <https://www.weather.gov/tsunamiready/become>. Applicants will submit the forms either electronically or via paper copy to the responsible warning coordination meteorologist.

**4. Describe efforts to identify duplication.**

StormReady and TsunamiReady are unique federal programs. There are no other known programs that collect the information requested on the applications.

**5. If the collection of information involves small businesses or other small entities, describe the methods used to minimize burden.**

Application for StormReady, TsunamiReady, StormReady Supporter and TsunamiReady Supporter recognition is voluntary and collection will not have a significant impact on small entities. Since the information required is minimal and can be found in a community emergency manager's customary and usual records, no impact on small governments is expected.

**6. Describe the consequences to the Federal program or policy activities if the collection is not conducted or is conducted less frequently.**

The program is designed to help as many communities prepare for hazardous weather situations as possible. If the NWS could not collect the information requested on the application form, it would be forced to withhold applications from communities seeking to be recognized and deny them the political and tangible benefits of StormReady/TsunamiReady recognition and possible reduction in flood insurance rates.

**7. Explain any special circumstances that require the collection to be conducted in a manner inconsistent with OMB guidelines.**

None.

**8. Provide information on the PRA Federal Register Notice that solicited public comments on the information collection prior to this submission. Summarize the public comments received in response to that notice and describe the actions taken by the agency in response to those comments. Describe the efforts to consult with persons outside the agency to obtain their views on the availability of data, frequency of collection, the clarity of instructions and recordkeeping, disclosure, or reporting format (if any), and on the data elements to be recorded, disclosed, or reported.**

A Federal Register Notice published on March 26, 2018 (83 FR 12944) solicited public comment on this request for extension. No comments were received.

Comments were solicited directly from several respondents. Two comments were received:

1. This new TsunamiReady form is easy to use and simpler than before. Thanks for arranging it to be along the phases of emergency management and our methods of conducting business.

Chuck Wallace, Deputy Director  
Grays Harbor County, Washington

2. The new TsunamiReady application form is simple, straightforward, and helps us maintain good records of local contacts and tsunami preparedness information about our coastal communities.

Kevin Miller, Tsunami Program Manager  
California Governor's Office of Emergency Services

(the new form refers to revisions approved in a 2015 change request).

**9. Explain any decisions to provide payments or gifts to respondents, other than remuneration of contractors or grantees.**

No payments or gifts will be provided to applicants. Each StormReady Supporter entity receives two signs to identify it as a program participant.

**10. Describe any assurance of confidentiality provided to respondents and the basis for assurance in statute, regulation, or agency policy.**

Data collected through this form are considered public information.

**11. Provide additional justification for any questions of a sensitive nature, such as sexual behavior and attitudes, religious beliefs, and other matters that are commonly considered private.**

The StormReady, TsunamiReady, StormReady Supporter, and TsunamiReady Supporter application forms do not contain any sensitive questions as described in the PRA guidance.

**12. Provide an estimate in hours of the burden of the collection of information.**

In addition to the current annualized responses and burden for StormReady and TsunamiReady applications – 240 applications and 480 hours, there are an additional estimated 25 StormReady Supporter and 25 hours / 20 TsunamiReady Supporter and 20 hours, for a total of 265 responses and 525 hours per year.

Number of new and renewal StormReady, TsunamiReady applicants expected	240 per year
Frequency of response for each respondent	Once every three years
Total number of responses expected	720 over 3 years, annualized to 240
Average response time per respondent	2 hours
Total annual burden	480 hours
Number of respondents for StormReady Supporter Application	25
Number of respondents for TsunamiReady Supporter Application	20
Frequency of response for each respondent	One time, no renewal required
Average response time per respondent	1 hour
Total annual response time	45 hours
<b>Total annual burden for all types of applicants/applications</b>	<b>525 hours</b>

These estimates are based on the experience of numerous communities over the course of the program.

**13. Provide an estimate of the total annual cost burden to the respondents or record-keepers resulting from the collection (excluding the value of the burden hours in Question 12 above).**

No start-up, capital, or operations related costs are expected from this collection. The form can be prepared without any special equipment and no monitoring or sampling activities are required. Information collected by the application form provides a description of existing capabilities and infrastructure. Record keeping of these items is considered a part of customary and usual business of a community's emergency manager.

The only cost an applicant must bear is the price of postage, if they choose to use standard mail; however, approximately 95% of applicants use the electronic form. Using an estimate of \$2.00 for postage per application, and assuming that 5% of applicants (13 of 265) mail in the forms, this would equate to a total annual cost of \$26.

**14. Provide estimates of annualized cost to the Federal government.**

The cost to the government of administering the StormReady program is limited to the hours that local Meteorologists-In-Charge (MIC) and Warning Coordination Meteorologists (WCM) spend at local Advisory Board Meetings and conducting site reviews of applicant communities. Local advisory board meetings typically last 2 hours. One MIC and one WCM attend. Site reviews take an average of 3 hours of a WCM’s time.

The total annual cost to the government is covered by the annual salaries of the government employees administering the program since the activities conducted in association with this program are considered to be a part of the regular duties of all Meteorologists-In-Charge and Warning Coordination Meteorologists. Using the assumptions in the table below, the dollar cost of administering the program is estimated to be \$79,294.40.

Because StormReady Supporter applications are not reviewed by the local advisory boards or renewed, there are no additional costs for this aspect of the program.

Base hourly rate of an MIC	\$49.68 (GS14-step 7)
Base hourly rate of a WCM	\$42.04 (GS13-step 7)
Duration of local advisory board meeting	2 hours
Cost to government of local advisory board meeting: 2 hours x (\$49.68 + \$42.04)	\$183.44
Duration of site visit	3 hours
Cost to government of site visit: 3 hours x (\$42.04)	\$126.12
Cost to government per application: (\$183.44 + \$126.12)	\$309.56
Total annual cost to the government 240 x (\$)	\$74,294.40

**15. Explain the reasons for any program changes or adjustments.**

There is an adjustment to the number of TsunamiReady Support applications. The program had thought that more communities would take advantage of this opportunity, but the applicant numbers have not borne that out. Thus there are an estimated 20 fewer applications and 20 fewer hours than in 2015.

**16. For collections whose results will be published, outline the plans for tabulation and publication.**

The individual pieces of information collected are not published. The NWS maintains a Web page identifying the communities that are recognized as StormReady, TsunamiReady, StormReady Supporter or TsunamiReady Supporter.

**17. If seeking approval to not display the expiration date for OMB approval of the information collection, explain the reasons why display would be inappropriate.**

The expiration date will be displayed on all application forms.

**18. Explain each exception to the certification statement.**

No exceptions identified.

**B. COLLECTIONS OF INFORMATION EMPLOYING STATISTICAL METHODS**

This collection does not employ statistical methods.



Community Information			
<b>Date of Application</b>			
<b>County/City/Town</b>		<b>Population</b>	
<b>Primary Point of Contact</b>		<b>Secondary Point of Contact</b>	
Name		Name	
Office		Office	
Title		Title	
Mailing Address		Mailing Address	
City		City	
State, ZIP		State, ZIP	
Phone		Phone	
e-mail		e-mail	
Guideline 1: Communications			
<b>Location of 24-Hour Warning Point</b>		<b>Location of Emergency Operations Center</b>	
<u>Verification Team General Notes:</u>			
<u>Renewal Comments:</u>			
			<u>Date:</u>
			<u>Initials:</u>
<i>Note: Please do not write in shaded areas.</i>			

Public reporting burden for this collection of information is estimated to average two hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other suggestions for reducing this burden to Donna Franklin, National Weather Service, 1325 East West Highway, Room 14456, Silver Spring, MD, 20910.



Statement on confidentiality. Notwithstanding any other provisions of the law, no person is required to respond to, nor shall any person be subjected to a penalty for failure to comply with, a collection of information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number.

<b>Guideline 2: NWS Information Reception Equipment</b>							
<b>Warning Point</b>	<b># Required</b> _____	<b># Verif</b> _____	<b>Verif</b>	<b>EOC</b>	<b># Required</b> _____	<b># Verif</b> _____	<b>Verif</b>
<input type="checkbox"/> NOAA Weather Radio (required if in range)			<input type="checkbox"/>	<input type="checkbox"/> NOAA Weather Radio (required if in range)			<input type="checkbox"/>
<input type="checkbox"/> NOAA Weather Wire (subscription)			<input type="checkbox"/>	<input type="checkbox"/> NOAA Weather Wire (subscription)			<input type="checkbox"/>
<input type="checkbox"/> EMWIN			<input type="checkbox"/>	<input type="checkbox"/> EMWIN			<input type="checkbox"/>
<input type="checkbox"/> Law Enforcement Teletype (LETS)			<input type="checkbox"/>	<input type="checkbox"/> Law Enforcement Teletype (LETS)			<input type="checkbox"/>
<input type="checkbox"/> Amateur Radio			<input type="checkbox"/>	<input type="checkbox"/> Amateur Radio			<input type="checkbox"/>
<input type="checkbox"/> Pagers <sup>1</sup> (warning reception)			<input type="checkbox"/>	<input type="checkbox"/> Pagers <sup>2</sup> (warning reception)			<input type="checkbox"/>
<input type="checkbox"/> Television (Local network or Cable TV)			<input type="checkbox"/>	<input type="checkbox"/> Television (Local network or Cable TV)			<input type="checkbox"/>
<input type="checkbox"/> Radio Station (AM/FM) - EAS Reception			<input type="checkbox"/>	<input type="checkbox"/> Radio Station (AM/FM) - EAS Reception			<input type="checkbox"/>
<input type="checkbox"/> NAWAS			<input type="checkbox"/>	<input type="checkbox"/> NAWAS			<input type="checkbox"/>
<input type="checkbox"/> Internet (subscription for alerts) _____			<input type="checkbox"/>	<input type="checkbox"/> Internet (subscription for alerts) _____			<input type="checkbox"/>
<input type="checkbox"/> Commercial Data Service _____			<input type="checkbox"/>	<input type="checkbox"/> Commercial Data Service _____			<input type="checkbox"/>
<input type="checkbox"/> Other <sup>3</sup> _____			<input type="checkbox"/>	<input type="checkbox"/> Other <sup>4</sup> _____			<input type="checkbox"/>
<input type="checkbox"/> Other <sup>5</sup> _____			<input type="checkbox"/>	<input type="checkbox"/> Other <sup>6</sup> _____			<input type="checkbox"/>
<i>List any additional capabilities on a separate sheet</i>							
<u>*Capabilities needing explanation:</u>							
<u>Verification Team Notes:</u>							
<u>Renewal Comments:</u>							
						<u>Date:</u>	<u>Initials:</u>



*Note: Please do not write in shaded areas.*

**Guideline 3: Local Weather & Water Monitoring Equipment**

<b>Warning Point</b>	# Required ____	# Verif ____	Verif	<b>EOC</b>	# Required ____	# Verif ____	Verif
<input type="checkbox"/> Anemometer (Wind gauge)			<input type="checkbox"/>	<input type="checkbox"/> Anemometer (Wind gauge)			<input type="checkbox"/>
<input type="checkbox"/> Rain Gauge			<input type="checkbox"/>	<input type="checkbox"/> Rain Gauge			<input type="checkbox"/>
<input type="checkbox"/> River Gauge			<input type="checkbox"/>	<input type="checkbox"/> River Gauge			<input type="checkbox"/>
<input type="checkbox"/> Locally owned Radar			<input type="checkbox"/>	<input type="checkbox"/> Locally owned Radar			<input type="checkbox"/>
<input type="checkbox"/> Internet Radar Source _____			<input type="checkbox"/>	<input type="checkbox"/> Internet Radar Source _____			<input type="checkbox"/>
<input type="checkbox"/> Internet Weather Station _____			<input type="checkbox"/>	<input type="checkbox"/> Internet Weather Station _____			<input type="checkbox"/>
<input type="checkbox"/> TV Radar Source _____			<input type="checkbox"/>	<input type="checkbox"/> TV Radar Source _____			<input type="checkbox"/>
<input type="checkbox"/> Other* _____			<input type="checkbox"/>	<input type="checkbox"/> Other* _____			<input type="checkbox"/>
<input type="checkbox"/> Other* _____			<input type="checkbox"/>	<input type="checkbox"/> Other* _____			<input type="checkbox"/>

*List any additional capabilities on a separate sheet*

\*Capabilities needing explanation:


Verification Team Notes:


Renewal Comments:


Date:

Initials:

*Note: Please do not write in shaded areas.*





Local Government-Owned Buildings in Which Public Traffic is Common				
Office	Location or Address	Tone Alert NOAA Weather Radio	Verif	Comments
Warning Point		<input type="checkbox"/>	<input type="checkbox"/>	
EOC		<input type="checkbox"/>	<input type="checkbox"/>	
City Hall		<input type="checkbox"/>	<input type="checkbox"/>	
School Superintendent		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	
<u>Verification Team Notes:</u>				
<u>Renewal Comments:</u>				
			<u>Date:</u>	<u>Initials:</u>
<i>Note: Please do not write in shaded areas.</i>				



**Guideline 5: Community Preparedness**

Annual Safety Talks				# Required _____	# Verif _____
	Date	Topic	Location	Speaker	
1					
2					
3					
4					
5					

*List any additional safety talks on a separate sheet*

**Weather Radio Purchase Program**

Has your community/county developed a program to subsidize the purchase of Specific Area Message Encoder (SAME) equipped Weather Radios for its citizens? (Not required) Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, provide details:


**Other Community Preparedness Activities**

	Date	Activity	Location	Organizer
1				
2				
3				
4				
5				

*List any additional activities on a separate sheet*

Renewal Comments:


Date:

Initials:

*Note: Please do not write in shaded areas.*



Guideline 6: Administrative Tools/Record keeping		Verif	Renewal Year
Formal Hazardous Weather Operations Plan ➤ Procedure for reporting storm damage to the local National Weather Service Office in real-time ➤ EOC Activation Procedures ➤ Spotter Activation Criteria ➤ Local Warning System(s) Activation Criteria		<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Warning Point personnel has authority to activate Warning System (written)		<input type="checkbox"/>	<input type="checkbox"/>
Spotter Roster and Training Record		<input type="checkbox"/>	<input type="checkbox"/>
Last Visit by Emergency Manager to NWS Office		<input type="checkbox"/> Biennial	<input type="checkbox"/>
Last Visit by NWS Officials to Community		<input type="checkbox"/> Annual	
Last NWS Spotter Training for Spotters and Dispatchers		<input type="checkbox"/> Biennial	
Last NWS Spotter Training Hosted/Co-Hosted ( <i>For populations &gt;40,000</i> )		<input type="checkbox"/> Biennial	
Exercises	Topic(s):	Date:	<input type="checkbox"/>
			Date:
<i>List any additional descriptions, narratives, or documentation on a separate sheet</i>			
Verification Team Notes:			
Renewal Comments:			
			Date:
			Initials:
Signature of Applying Official			
Application Submitted by: (print name):			
Office:		Title:	
Signature:		Date:	
NWS Personnel Receiving Application (print name):			
Date Received:			
Note: Please do not write in shaded areas.			



**Site Verification Team Signatures**

<u>Print Name:</u>	
<u>Office:</u>	<u>Title:</u>
<u>Signature:</u>	<u>Date:</u>
<u>Print Name:</u>	
<u>Office:</u>	<u>Title:</u>
<u>Signature:</u>	<u>Date:</u>
<u>Print Name:</u>	
<u>Office:</u>	<u>Title:</u>
<u>Signature:</u>	<u>Date:</u>
<u>Print Name:</u>	
<u>Office:</u>	<u>Title:</u>
<u>Signature:</u>	<u>Date:</u>

**Signature in Renewal Year**

<u>Application Submitted by: (print name):</u>	
<u>Office:</u>	<u>Title:</u>
<u>Signature:</u>	<u>Date:</u>
<u>NWS Personnel Receiving Application (print name):</u>	
<u>Date Received:</u>	



Community Contact Information			
County/Parish/City/Town/Site		Population	
<b>Primary Point of Contact</b>		<b>Secondary Point of Contact</b>	
Name		Name	
Office		Office	
Title		Title	
Mailing Address		Mailing Address	
City		City	
State, ZIP		State, ZIP	
Phone		Phone	
email		email	
Mitigation Guidelines			
<b>MIT 1</b>	<input type="checkbox"/> Designate and map tsunami hazard zones for emergency management planning.		<input type="checkbox"/> Verified
<b>MIT 2</b>	<input type="checkbox"/> Include tsunami hazard and community vulnerability information in FEMA-approved multi-hazard mitigation plan.		<input type="checkbox"/> Verified
<b>MIT 3</b>	<input type="checkbox"/> Install signage that identifies, for example, tsunami danger area and/or hazard zone (entering and leaving tsunami zone signs), evacuation routes, and assembly area and provides tsunami response education (go to high ground).		<input type="checkbox"/> Verified
<input type="checkbox"/> Tsunami hazard zone		<input type="checkbox"/> Entering/leaving tsunami hazard zone	<input type="checkbox"/> Evacuation routes
<input type="checkbox"/> Assembly areas		<input type="checkbox"/> Response education	
Verification Team/Renewal Notes			
<i>Please do not write in shaded areas.</i>			

Public reporting burden for this collection of information is estimated to average two hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other suggestions for reducing this burden to Mike Angove, National Weather Service, 1325 East West Highway, Room 13110, Silver Spring, MD, 20910.

Statement on confidentiality: Notwithstanding any other provisions of the law, no person is required to respond to, nor shall any person be subjected to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number.



<b>PREP 1</b>	Produce easily understood tsunami evacuation maps as determined to be appropriate by local authorities.		<input type="checkbox"/> Verified
	<input type="checkbox"/> Print	<input type="checkbox"/> Digital media	<input type="checkbox"/> Other _____
<b>PREP 2</b>	Support ongoing tsunami public education effort. This effort should include developing and distributing outreach materials: <b>at least three wide-reaching diverse methods.</b>		<input type="checkbox"/> Verified
<input type="checkbox"/> Brochures/flyers placed at public venues		<input type="checkbox"/> Regular tsunami-related posts for local social media such as Facebook, Twitter, etc.	
<input type="checkbox"/> Brochures/flyers sent to businesses and/or residences		<input type="checkbox"/> Billboard, roadside, highway, or educational (kiosk) signage	
<input type="checkbox"/> Faith-based/civic group newsletters or mailings		<input type="checkbox"/> Bulk public email	
<input type="checkbox"/> Locally supported website		<input type="checkbox"/> Public utility/service industry bill inserts	
<input type="checkbox"/> Sponsor local radio/television ads		<input type="checkbox"/> Historical markers/interpretive signs	
<input type="checkbox"/> Newspaper Inserts		<input type="checkbox"/> Other _____	
<b>PREP 3</b>	Support an ongoing sustained tsunami education effort specific to public schools in coastal community pursuing TsunamiReady recognition: <b>At least one.</b>		<input type="checkbox"/> Verified
<input type="checkbox"/> Distribute brochures/flyers to schools		<input type="checkbox"/> Provide contents for school website	
<input type="checkbox"/> Submit articles for school groups, such as PTA		<input type="checkbox"/> Provide posts for school social media	
<input type="checkbox"/> Include private schools in distributions above		<input type="checkbox"/> Send message via school email	
<input type="checkbox"/> Other _____			
Verification Team/Renewal Notes			



<b>PREP 4</b>	Hold community-wide outreach or education activity annually: <b>at least one.</b>	<input type="checkbox"/> Verified
<input type="checkbox"/> Leverage national, state or regional campaigns through social media		
<input type="checkbox"/> Local public safety campaign, such as "Tsunami Preparedness Week" or combine with "The Great Shakeout"		
<input type="checkbox"/> Door-to-door safety campaign		
<input type="checkbox"/> Booth at community events and/or county fairs		
<input type="checkbox"/> Multi-hazard events or presentations		
<input type="checkbox"/> Safety presentation or workshop to community or business groups that includes tsunami content		
<input type="checkbox"/> Business owner/employee training for high-occupancy businesses in tsunami hazard zones		
<input type="checkbox"/> Other _____		
<b>PREP 5</b>	Conduct community exercises that reinforce the concepts contained in Prep-1 through Prep-4.	<input type="checkbox"/> Verified
Exercise Location	Date of exercise	<input type="checkbox"/> Tsunami only <input type="checkbox"/> Multi-hazard Other hazards addressed _____
<input type="checkbox"/> Tabletop exercise <input type="checkbox"/> Functional exercise <input type="checkbox"/> Full-scale exercise		
<b>PREP 6</b>	Conduct evacuation drills for all public schools in the mapped tsunami evacuation zone to reinforce the concepts contained in Prep-1 through Prep-4.	<input type="checkbox"/> Verified
Exercise Location	Date of exercise	<input type="checkbox"/> Tsunami only <input type="checkbox"/> Multi-hazard Other hazards addressed _____
Verification Team/Renewal Notes  .		



<b>Response Guidelines</b>		
<b>RESP 1</b>	Address tsunami hazards in the community's emergency operations plan (EOP) or other plan.	<input type="checkbox"/> Verified
<input type="checkbox"/> Included in EOP		
<input type="checkbox"/> Included in other plan _____		
<input type="checkbox"/> Identifies tsunami as a hazard and provides risk assessment		
<input type="checkbox"/> Details 24-hour warning point procedures		
<input type="checkbox"/> Specifies EOC activation criteria and staffing expectations		
<input type="checkbox"/> Specifies activation procedures for public warning systems		
<input type="checkbox"/> Includes contact information for all jurisdictional agencies, response partners, and NWS		
<input type="checkbox"/> Includes tsunami evacuation plans and maps		
<input type="checkbox"/> Includes procedures for updating of public warning, as well as safe return protocols		
<input type="checkbox"/> Includes procedures for providing security for evacuated areas		
<input type="checkbox"/> Includes tsunami impact reporting procedures		
<b>RESP 2</b>	<input type="checkbox"/> Address tsunami hazards in the emergency operations plans (EOP) for all public schools in the tsunami hazard zone.	<input type="checkbox"/> Verified
<b>RESP 3</b>	Commit to supporting the EOC during tsunami incidents if an EOC is opened and activated.	<input type="checkbox"/> Verified
<input type="checkbox"/> Open 24/7 or has plan to activate an EOC for tsunami incidents in accordance with EOP		
<input type="checkbox"/> Has warning reception and dissemination capability		
<input type="checkbox"/> Has ability and authority to activate the public warning system within its area of responsibility		
<input type="checkbox"/> Maintains the ability to communicate within and across jurisdictions		
<input type="checkbox"/> Maintains established communication links with NWS		
Verification Team/Renewal Notes		



<b>RESP 4</b>	Have redundant and reliable means for a 24-hour warning point (and EOC if activated) to <b>receive</b> official tsunami watch, advisory, and warning alerts: <b>at least three.</b>	<input type="checkbox"/> Verified
<input type="checkbox"/> NOAA Weather Radio	<input type="checkbox"/> Third-party alert provider	
<input type="checkbox"/> Statewide warning fan-out notification	<input type="checkbox"/> Local radio Emergency Alert System, LP1/LP2	
<input type="checkbox"/> NOAAPORT receiving station	<input type="checkbox"/> Active Internet monitoring capability	
<input type="checkbox"/> NAWAS drop	<input type="checkbox"/> NOAA Weather Wire drop	
<input type="checkbox"/> NWSChat	<input type="checkbox"/> USCG broadcasts/monitor marine channels	
<input type="checkbox"/> EMWIN receiver	<input type="checkbox"/> Direct email from NWS Tsunami Warning Center (TWC)	
<input type="checkbox"/> Statewide telecommunications systems	<input type="checkbox"/> Direct fax from NWS TWC	
<input type="checkbox"/> CISN display program	<input type="checkbox"/> Text message or direct pager from TWC	
<input type="checkbox"/> Amateur radio transceiver		
<input type="checkbox"/> Other _____		
<b>RESP 5</b>	Have redundant and reliable means for 24-hour warning point and/or EOC to <b>disseminate</b> official tsunami watch, advisory, and warning alerts to the public: <b>at least three.</b>	<input type="checkbox"/> Verified
<input type="checkbox"/> EAS message initiation and broadcast	<input type="checkbox"/> Amateur radio operator network (ham radio)	
<input type="checkbox"/> Cable TV audio/video overrides	<input type="checkbox"/> Telephone mass notification system	
<input type="checkbox"/> Local flood warning system	<input type="checkbox"/> Telephone tree to critical facilities	
<input type="checkbox"/> Plan for sirens on emergency vehicles	<input type="checkbox"/> Coordinated area-wide radio network	
<input type="checkbox"/> Outdoor warning siren(s)	<input type="checkbox"/> Countywide communications network	
<input type="checkbox"/> Local alert broadcast system	<input type="checkbox"/> Social media (Twitter, Facebook)	
<input type="checkbox"/> Local pager/texting system (dissemination)	<input type="checkbox"/> Lifeguards on beaches and on patrol	
<input type="checkbox"/> Other _____		
Verification Team/Renewal Notes		



<b>RESP 6</b>	Have Public Alert-certified NOAA Weather Radio (NWR) receivers in critical facilities and public venues.			<input type="checkbox"/> Verified
Office	Location or Address	NWR	Comments	
Communication dispatch center		<input type="checkbox"/>		
EOC		<input type="checkbox"/>		
City Hall, county courthouse or similar		<input type="checkbox"/>		
School superintendent		<input type="checkbox"/>		
		<input type="checkbox"/>		
<b>RESP 7</b>	Conduct emergency operations plan exercises that test at least one component of the community's EOP or one item from RESP 4 through RESP 6.			<input type="checkbox"/> Verified
Exercise Location	Date of exercise	<input type="checkbox"/> Tsunami only <input type="checkbox"/> Multi-hazard Other hazards addressed _____		
<input type="checkbox"/> Tabletop exercise <input type="checkbox"/> Functional exercise <input type="checkbox"/> Full-scale exercise				
Verification Team/Renewal Notes				



<b>Signature of Applying Official</b>			
Office Name			
Application Submitted by (name of applicant)		Title	
Signature		Date	
NWS Personnel Receiving Application (print name)		Date Received	
<b>Site Verification Team Signatures</b>			
Print Name			
Office		Title	
Signature		Date	
Print Name			
Office		Title	
Signature		Date	
Print Name			
Office		Title	
Signature		Date	
Print Name			
Office		Title	
Signature		Date	
<b>Signature in Renewal Year</b>			
Office			
Application Submitted by (name of applicant)		Title	
Signature		Date	
NWS Personnel Receiving Application (print name)		Date Received	

## StormReady<sup>®</sup> Supporter Application

StormReady Supporters are local entities that do not qualify for a full StormReady Recognition yet promote the principles of the StormReady program into their severe weather safety and awareness plans. Entities may be eligible as a StormReady Supporter, based on the bylaws of the state NWS StormReady Board and the endorsement from local emergency management. Final approval for a StormReady Supporter designation is made by the state StormReady Board.

Previous StormReady recognition of the county or community in which the applying entity resides is not a requirement to achieve a StormReady Supporter designation. There is no national renewal standard for StormReady Supporters; however, state NWS StormReady Boards may establish renewal time frames in their bylaws if they deem it appropriate.

Examples of potential StormReady Supporters might include, but are not limited to, businesses, hospitals, shopping centers and malls, schools and nuclear power plants.

This StormReady Supporter Application outlines minimum requirements and provides a framework to help NWS and Local StormReady Boards ensure consistency in the StormReady Supporter program. These guidelines may be satisfied by incorporating data/services provided by America's Weather Industry.

Name of applying entity: \_\_\_\_\_

Point of Contact: \_\_\_\_\_

Address/City/State/Zip:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Website address (optional): \_\_\_\_\_

Applicant official's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other suggestions for reducing this burden to Donna.Franklin@noaa.gov, National Weather Service, 1325 East-West Highway, Silver Spring, MD 20910.

Notwithstanding any other provisions of the law, no person is required to respond to, nor shall any person be subjected to a penalty for failure to comply with, a collection of information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number.

## StormReady® Supporter Application

(These are recommended minimal requirements to achieve the StormReady “Supporter” designation)

OK	Guidelines	(Select all that apply)						
<input type="radio"/>	<b>Warning Reception</b>	NWR <input type="radio"/>	TV <input type="radio"/>	Radio <input type="radio"/>	Cable <input type="radio"/>	Wireless Device <input type="radio"/>	Internet <input type="radio"/>	Other (list below) <hr/> <hr/> <hr/> <hr/>
<input type="radio"/>	<b>Communication/ Relay of Warning</b>	PA <input type="radio"/>	Wireless Devices <input type="radio"/>		Siren <input type="radio"/>	Phone <input type="radio"/>	Fax <input type="radio"/>	Other (list below) <hr/> <hr/> <hr/> <hr/>
<input type="radio"/>	<b>Hazardous Weather Response Plan</b>	Print Copy Available <input type="radio"/>		Electronic Copy Available <input type="radio"/>	Print Copy Posted in Common Area <input type="radio"/>		Other (list below) <hr/> <hr/> <hr/> <hr/>	
<input type="radio"/>	<b>Sheltering Location</b>	Basement <input type="radio"/>		Interior Hall <input type="radio"/>	Underground Shelter <input type="radio"/>		Other (list below) <hr/> <hr/> <hr/> <hr/>	
<input type="radio"/>	<b>Preparedness</b>	Annual Activity <input type="radio"/>		Bi-Annual Activity <input type="radio"/>	Safety Drill <input type="radio"/>		Other (list below) <hr/> <hr/> <hr/> <hr/>	



# TsunamiReady® Supporter Application

Contact Information			
Applicant Entity Name:		Peak # Occupants:	
Primary Point of Contact		Secondary Point of Contact	
Name:		Name:	
Office:		Office:	
Title:		Title:	
Mailing Address:		Mailing Address:	
City:		City:	
State, ZIP:		State, ZIP:	
Phone:		Phone:	
Email Address:		Email Address:	
Location of Communications Center (if applicable):			
Notes			
<i>Please do not write in shaded areas.</i>			

Public reporting burden for this collection of information is estimated to average one hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other suggestions for reducing this burden to Rocky Lopes, National Weather Service, 1325 East West Highway, Room 13-121, Silver Spring, MD, 20910.

Notwithstanding any other provisions of the law, no person is required to respond to, nor shall any person be subjected to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number.



<b>TsunamiReady Supporter Criteria*</b> (Check all that apply)			
<b>1. Have Ways to Receive Tsunami Messages</b> (at least two, one should include warnings, advisories, and watches)	<input type="checkbox"/> NOAA Weather Radio <input type="checkbox"/> TV/cable <input type="checkbox"/> Radio <input type="checkbox"/> Private providers <input type="checkbox"/> Wireless Emergency Alerts (warnings only) <input type="checkbox"/> Email/text notifications	Other (list below)	Verified  <input type="checkbox"/>
	Hours messages monitored (at least when entity is occupied): <input style="width: 100px;" type="text"/>		
<b>2. Have Ways to Communicate Tsunami Messages</b> (at least two, should include warnings and advisories, at least)	<input type="checkbox"/> Public address <input type="checkbox"/> Sirens <input type="checkbox"/> Email/text notifications <input type="checkbox"/> Phone <input type="checkbox"/> Door-to-door	Other (list below)	Verified  <input type="checkbox"/>
	Hours messages issued (at least when entity is occupied): <input style="width: 100px;" type="text"/>		
<b>3. Make Tsunami Hazard or Evacuation Zone Map Available</b>	<input type="checkbox"/> Posted in central location (at least one per occupied building) <input type="checkbox"/> Posted throughout entity <input type="checkbox"/> Distributed <input type="checkbox"/> Available online (e.g., intranet or website)	Other (list below)	Verified  <input type="checkbox"/>
	Date of most current map: <input style="width: 100px;" type="text"/>		
	Map provider: <input style="width: 100px;" type="text"/>		
<b>4. Conduct Tsunami Awareness and Preparedness Activities for:</b> <input type="checkbox"/> Staff <input type="checkbox"/> Residents <input type="checkbox"/> Visitors <input type="checkbox"/> Others (list):	<input type="checkbox"/> Annual major outreach/education activity (at least one, should include staff) <input type="checkbox"/> Other outreach/education activities  <b>Drills and exercises</b> <input type="checkbox"/> Tsunami evacuation drill <input type="checkbox"/> Participate in community tsunami exercise	Other (list below)	Verified  <input type="checkbox"/>
	Hours messages issued (at least when entity is occupied): <input style="width: 100px;" type="text"/>		
<b>5. Have Tsunami Response Plan with Evacuation Instructions</b>	<input type="checkbox"/> Print copy available <input type="checkbox"/> Electronic copy available <input type="checkbox"/> Print copy posted in common area	Other (list below)	Verified  <input type="checkbox"/>
Describe additional activities entity does to support TsunamiReady program goals: <input style="width: 100%; height: 40px;" type="text"/>			Verified  <input type="checkbox"/>

\*For more information about these criteria refer to the "TsunamiReady Supporter Information" available at <http://www.tsunamiready.noaa.gov/supporters.shtml>.



<b>Signature of Applying Official</b>			
Name of Applying Entity:			
Name of Applying Official:		Title:	
Signature:		Date:	
NWS Personnel Receiving Application (print name):		Date Received:	
<b>NWS Approver Signature</b>			
NWS Office:			
Print Name:		Title:	
Signature:		Date:	
<b>NWS Signature in Renewal Year</b>			
Name of Renewing Official:		Title:	
NWS Office:			
NWS Personnel Receiving Renewal Request (print name):		Date Received:	
NWS Approver (print name):		Title:	
Signature:		Date:	

practical utility; (b) the accuracy of the agency's estimate of the burden (including hours and cost) of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology.

Comments submitted in response to this notice will be summarized and/or included in the request for OMB approval of this information collection; they also will become a matter of public record.

Dated: March 21, 2018.

**Sarah Brabson,**

*NOAA PRA Clearance Officer.*

[FR Doc. 2018-06045 Filed 3-23-18; 8:45 am]

**BILLING CODE 3510-08-P**

## DEPARTMENT OF COMMERCE

### National Oceanic and Atmospheric Administration

#### Proposed Information Collection; Comment Request; StormReady, TsunamiReady, StormReady/TsunamiReady, and StormReady Supporter Application Forms

**AGENCY:** National Oceanic and Atmospheric Administration (NOAA), Commerce.

**ACTION:** Notice.

**SUMMARY:** The Department of Commerce, as part of its continuing effort to reduce paperwork and respondent burden, invites the general public and other Federal agencies to take this opportunity to comment on proposed and/or continuing information collections, as required by the Paperwork Reduction Act of 1995.

**DATES:** Written comments must be submitted on or before May 25, 2018.

**ADDRESSES:** Direct all written comments to Jennifer Jessup, Departmental Paperwork Clearance Officer, Department of Commerce, Room 6616, 14th and Constitution Avenue NW, Washington, DC 20230 (or via the internet at [pracomments@doc.gov](mailto:pracomments@doc.gov)).

**FOR FURTHER INFORMATION CONTACT:** Requests for additional information or copies of the information collection instrument and instructions should be directed to Rocky Lopes, (301) 427-9380 or [Rocky.Lopes@noaa.gov](mailto:Rocky.Lopes@noaa.gov).

**SUPPLEMENTARY INFORMATION:**

## I. Abstract

This request is for extension of a currently approved information collection.

NOAA's National Weather Service is extending its "StormReady, TsunamiReady, StormReady/StormReady, StormReady Supporter and TsunamiReady Supporter Application Forms". StormReady and TsunamiReady are voluntary programs offered as a means of providing guidance and incentive to officials interested in improving their respective hazardous weather operations. The StormReady Application Form, Tsunami-Ready Application Form and StormReady/StormReady Application Form will be used by localities to apply for initial StormReady or TsunamiReady and StormReady recognition and renewal of that recognition every six years. The government will use the information collected to determine whether a community has met all of the criteria to receive StormReady and/or TsunamiReady recognition. Businesses, schools, non profit organizations and other non-governmental entities often establish severe weather safety plans and actively promote severe weather safety awareness activities. Many of these entities do not have the resources necessary to fulfill all the eligibility requirements to achieve the full StormReady, StormReady/TsunamiReady, StormReady or StormReady/TsunamiReady recognition. Therefore, the NWS established the StormReady and TsunamiReady Supporter programs to recognize entities that promote the principles and guidelines of the full programs, but do not meet the eligibility requirements for full recognition.

## II. Method of Collection

Applications may be faxed, mailed or emailed.

## III. Data

*OMB Control Number:* 0648-0419.

*Form Number(s):* None.

*Type of Review:* Regular submission (extension of a currently approved information collection).

*Affected Public:* Business or other for-profit organizations; not-for-profit institutions.

*Estimated Number of Respondents:* 305.

*Estimated Time per Response:* Initial applications, 2 hours; renewal applications, 1 hour.

*Estimated Total Annual Burden Hours:* 565.

*Estimated Total Annual Cost to Public:* \$150 in recordkeeping/reporting costs.

## IV. Request for Comments

Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden (including hours and cost) of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology.

Comments submitted in response to this notice will be summarized and/or included in the request for OMB approval of this information collection; they also will become a matter of public record.

Dated: March 21, 2018.

**Sarah Brabson,**

*NOAA PRA Clearance Officer.*

[FR Doc. 2018-06044 Filed 3-23-18; 8:45 am]

**BILLING CODE 3510-KE-P**

## DEPARTMENT OF COMMERCE

### National Telecommunications and Information Administration

#### Commerce Spectrum Management Advisory Committee Meeting

**AGENCY:** National Telecommunications and Information Administration, U.S. Department of Commerce.

**ACTION:** Notice of open meeting.

**SUMMARY:** This notice announces a public meeting of the Commerce Spectrum Management Advisory Committee (Committee). The Committee provides advice to the Assistant Secretary of Commerce for Communications and Information and the National Telecommunications and Information Administration (NTIA) on spectrum management policy matters.

**DATES:** The meeting will be held on April 25, 2018, from 9:00 a.m. to 12:00 p.m., Eastern Daylight Time (EDT).

**ADDRESSES:** The meeting will be held at the Morgan, Lewis & Bockius, LLP, 1111 Pennsylvania Avenue NW, Suite 201, Washington, DC 20004. Public comments may be mailed to Commerce Spectrum Management Advisory Committee, National Telecommunications and Information Administration, 1401 Constitution Avenue NW, Room 4600, Washington,