



## TsunamiReady® Supporter Application

Community Contact Information			
Applicant Entity Name:		Peak # Occupants	
<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	
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 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 [nws.tsunamigrants@noaa.gov](mailto:nws.tsunamigrants@noaa.gov).

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>TsunamiReady Supporter Criteria*</b> <b>(Check all that apply)</b> <i>*For more information about these criteria refer to the “TsunamiReady Supporter Information” available at <a href="http://www.tsunamiready.noaa.gov/supporters.shtml">http://www.tsunamiready.noaa.gov/supporters.shtml</a></i>			
<b>1. Have ways to receive tsunami messages</b> (at least two, one should include warnings, advisories, and watches)	NOAA Weather Radio TV/Cable Radio Private Providers Wireless Emergency Alerts (warnings only) Email/text notifications	Others (list below)	<b>Verified</b>
	Hours messages monitored (at least when entity is occupied)		
<b>2. Have ways to communicate tsunami messages</b> (at least two, should include warnings and advisories)	Public address Sirens Email/text notifications Phone Door-to-Door	Others (list below)	<b>Verified</b>
	Hours messages monitored (at least when entity is occupied)		
<b>3. Make Tsunami Hazard or Evacuation Zone Map Available</b>	Posted in central location (at least one per occupied building) Posted throughout entity Distributed Available online (e.g., intranet or website)	Others (list below)	<b>Verified</b>
	Date of most current map:		
	Map provider		
<b>4. Conduct Tsunami Awareness and Preparedness Activities for:</b>  Staff Residents Visitors Others (list)	Annual major outreach/education activity (at least one, should include staff) Other outreach/education activities	Others (list below)	<b>Verified</b>
	Drills and exercises Tsunami evacuation drill Participate in community tsunami exercise	Others (list below)	<b>Verified</b>



<b>5. Have Tsunami Response Plan with Evacuation Instructions</b>	Print copy available Electronic copy available Print copy posted in common area	Others (list below)	<b>Verified</b>
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Describe additional activities entity does to support TsunamiReady program goals:

**Signature of Applying Official**

I acknowledge that this baseline TsunamiReady recognition does not indicate that our community has identified and/or provided reasonable access to high-ground or safe refuge for all populations. I have discussed this with the National Weather Service Verifier and my State/Territory Emergency Manager (or similar position).

Name of Applying Entity			
Name of Applying Official		Title	
Signature		Date	
NWS Personnel Receiving Application (print name)		Date Received	

**NWS Approver Signature**

NWS Office			
Print Name		Title	
Signature		Date	

**NWS Signature in Renewal Year**

Name of Renewing Official:		Title	
NWS Office:			
NWS Personnel Receiving Renewal Request (print name):		Date Received	
NWS Approver (print name)		Title	
Signature:		Date	