



St. James Parish: Application for Private Property Debris Removal Program (PPDR)

Please fill out the following information to apply for the PPDR program. Please note that all information must be correct to be eligible for the program.

Name: _____ Date: _____

Address applying for program: _____

Current address (if not same as above): _____

Phone Number: _____ Email Address: _____

Please include the following documentation with the application:

- A copy of the property insurance policy, if the property is insured, including detailed policy with cover page and itemized statement of coverage
- A proof of loss/statement of loss from the insurance company, if the property was insured at the time of Hurricane Ida
- A **color** copy of each owner's driver's license or government issued identification.
- Proof of ownership, such as a warranty deed, title, tax statement, etc.

The final step is to fill out the Right-of-Entry (ROE) Form that is attached. This grants access to the property for inspection and all necessary work to be done.

If you have any questions, please contact Devin Cerrato at (813)-777-7102 or stjamesppdr@rostan.com.

<div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> ROE No. _____ </div> <div style="border: 1px solid black; height: 60px; margin-top: 5px;"></div>	<p>PRIVATE CONTRACTOR DEBRIS REMOVAL LOUISIANA 2021 FEMA-DR-4611-LA</p> <p>Address:</p> <p>Tax ID Block/Lot: Federal/Louisiana/Tribal Landmark [Y/N]:</p>
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RIGHT OF ENTRY (“ROE”) ONTO PRIVATE PROPERTY FOR DEBRIS REMOVAL AND/OR DEMOLITION DISASTER ASSISTANCE HURRICANE IDA (FEMA-DR-4611-LA)

Ownership Interest’s Grant of Right of Entry for Debris Removal and/or Demolition Activities

The undersigned hereby certifies he/she/they/ is/are (check):
 _____ Property Owner(s) with authority to grant access to the property at (Address):

_____ The authorized agent of the Property Owner at above address.

The Property Owner(s)/agent authorize(s) the Parish of St. James, the State of Louisiana and the United States of America, their respective agents, successors and assigns, contractors and subcontractors (collectively, the “Governments/Contractors”) to have the right of access and to enter the property above specified for purposes of performing debris removal as it is a public health and safety threat and/or for demolishing structures local authorities have determined through due process to be unsafe directly because of the declared major disaster, Hurricane Ida, FEMA-DR-4611-LA.

Government Not Obligated; No Expense Except For Insurance Proceeds

The Property Owner(s)/agent understand(s) that this Right of Entry does not obligate the Governments/Contractors to perform debris removal or demolition. Governments/Contractors will access the property under this ROE if the work has been determined necessary in accordance with Federal, State, or local regulations. The Property Owner(s) will not be charged for the work conducted by Governments/Contractors. However, if the Property Owner(s) receive(s) insurance proceeds or compensation from other sources for debris removal or demolition, the Property Owner’s(s’) obligation is set out in the section below, entitled “Avoidance of Duplication of Benefits: Reporting Debris Removal/Demolition Money Received”

Government Indemnified and Held Harmless

The Property Owner(s)/agent agrees to indemnify and hold harmless the Governments/Contractors for any damage of any type whatsoever to the above described property or to personal property and fixtures situated thereon, or for bodily injury or death to persons on the property, and hereby releases, discharges and waives any and all actions, either legal or equitable, which the Property Owner(s) has/have, or ever might or may have, by reason of any action taken by Governments/Contractors to remove debris or demolish unsafe structures.

Avoidance of Duplication of Benefits: Reporting Debris Removal/Demolition Money Received

Property Owner(s)/agent has/have an obligation to file an insurance claim if coverage is available. Property Owner(s)/agent understand(s) and acknowledge(s) that receipt of compensation or reimbursement for performance of the aforementioned activities from any source, including Small Business Administration, private insurance, an individual and

family grant program or any other public or private assistance program could constitute a duplication of benefits prohibited by federal law. If the Property Owner(s)/agent receive(s) any compensation from any source for debris removal or demolition activities on this property, the Property Owner(s)/agent will report it to the Parish DHR Satellite Office at 2430 Louisiana Ave, Lutcher, LA 70071.

Release of Insurance Information

If insured, the Property Owner(s)/agent authorize(s) its/their insurer, (Company) _____, to release information relating to coverage and payments for debris removal/demolition activities (Claim # _____, Policy # _____) to the Parish identified herein and/or to the State of Louisiana.

Acknowledgment of Prohibition on Fraud, Intentional Misstatements

The Property Owner(s)/agent understand(s) that an individual who fraudulently or willfully misstates any fact in connection with this agreement may be subject to penalties under state and federal law, including civil penalties, imprisonment for not more than five years, or both, as provided under 18 USC § 1001.

Signature(s). Witnesses Only if Demolition

Property Owner(s) or Authorized Agent and Mortgage/Lien Holder(s)

For the considerations and purposes set forth herein, I/we hereby set my/our hand(s) and seal(s) this _____ day of _____, 2022.

Witness 1 _____

Witness 2 _____

Property Owner(s)/Authorized Agent:

Sign _____

Privacy Act Statement: The Property Owner/ Owner’s Authorized Agent acknowledge(s) that information submitted will be shared with other government agencies, federal and non-federal, and contractors, their subcontractors and employees but solely for purposes of disaster relief management to meet the objectives of this Right of Entry. This form is signed to allow access to perform debris removal and/or demolition operations on the above-mentioned property, to authorize the release of insurance policy/claim information and to assure notification of any lien holder of demolition.

Print: Property Owner(s)/Authorized Agent:

Current Address and Telephone No.: _____
