DEPARTMENT OF HOMELAND SECURITY
Federal Emergency Management Agency
<b>REQUEST FOR PRESIDENTIAL DISASTER DECLARATION</b>
MAJOR DISASTER OR EMERGENCY

1. Request Date 3/26/2020

Burden Disclosure Notice Public reporting burden for this form is estimated to average 9 hours per response. The burden estimate includes the time for							
reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and submitting the form. This collection of information is required to obtain a benefit. You are not required to respond to this collection of information unless it displays a valid OMB control number. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing the burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 500 C Street SW, Washington, DC 20472, Paperwork Reduction Project (1660-0009). <b>NOTE: Do not send your completed form to this address</b> .							
	Completion of this form including applicable attachments satisfies legal requirements for emergency and major disaster declaration						
requests under 42 U.S.C. §§ 5170 and 5191, respectively, as implemented at 44 C.F.R §§ 206.35 and 206.36. Failure to use this form may result in a failure to meet these requirements and/or a delay in processing the request.							
2a. Name of State (as defined in Stafford Act 1 tribal government requesting declaration.	2b. Population (as reported by 2010 Census) or estimated population of Indian tribal 9,883,640						
State of Michigan	population of Indian tribal government's damaged area(s).						
3. Governor's or Tribal Chief Executive's Name	4. Designation of State or Tribal Coordinating Officer upon declaration (if available) and phone number						
Gretchen Whitmer	Major Emmitt McGowan, 313-520-9450						
5. Designation of Governor's Authorized Representative or Tribal Chief Executive Representative upon declaration (if available) and phone number Inspector James Grady, 248-469-2000							
6. Declaration Request For: Kafford Disaster (Stafford Act Sec. 401) Emergency (Stafford Act Sec. 501 (a))							
7. Incident Period:       Beginning Date       End Date         1/31/2020       or       Continuing         If requesting a "continuing" incident period, enclose an official statement from a qualified Federal Government agency acknowledged as a national authority in a specific incident field (e.g., United States Geological Survey for seismic incidents, the National Weather Service for flooding).							
7b. Type of Incident (Check all that apply)							
Drought Earthquake Explosion Fire Flood Hurricane Landslide Mudslide							
Snowstorm (rain, high water, wind-driven, rain, hail, lightning) (Must include Enclosure D: Historic and Current Snowfall Straight-Line Winds Data)							
Tidal Wave Tornado Tropical Depression Tropical Storm Tsunami Volcanic Eruption Winter Storm							
Other (please specify) Disease outbreak/pa	ndemic (COVID-19)						
<ol> <li>B. Description of damages (Short description of impacts of disaster on affected area and population). Include additional details in enclosed Governor's or Tribal Chief Executive's cover letter.</li> <li>As of March 25, 2020, 2,295 cases of COVID-19 and 43 associated deaths have been confirmed for the State of Michigan. There are critical shortages of hospital and ICU capacity, medical equipment, personal protective equipment, and other resources and supplies.</li> </ol>							
Case numbers are growing rapidly which will full local governments to respond to this crisis.	arther overwhelm the state's public	health system and exceed the ability of state and					
<ol> <li>Description of the nature and amount of Sta committed. Include additional details in enclos</li> </ol>							
The State Emergency Operations Center and Community Health Emergency Coordination Center have been activated, are marshaling resources, and direct the state response to this crisis. Local governments have staffed Emergency Operations Centers, activated response aspects of Emergency Operations Plans and health procedures, and are coordinating response activities locally. 24 Executive Orders have been issued to ensure the health and safety of the public and make necessary resources and supplies available to the maximum extent possible.							

		10. Joint Prelim	iinary Damage A	ssessment*	
Individual Assistance	Dates Performe	d Requested	N/A	Start	End
Individual Assistance Acces The incident is of unusual se supplemental Federal Assist	everity and magnit	ude and field d		• •	ssary to determine the requirement for
Public Assistance	Dates Performed	Requested N	/A	Start	End
Public Assistance Accessib The incident is of unusual se supplemental Federal Assist	everity and magnit	ude and field d		• •	ssary to determine the requirement for
		11. Progran	ns and Areas Re	quested	
Individual Assistance 🗌 N	/A 🔀 Individua Program	als and Househ	olds 🔀 Crisi	s Counseling Prog	gram 🖂 Disaster Unemployment Assistance
🖂 All 🛛 Disaster Ca	se Management	🔀 Disaster	Legal Services	Small Busir	ness Administration (SBA) Disaster
tribe(s) and/or tribal area(s) Statewide, including all cour	) If additional space	ce is needed, pl	ease enclose ac	ditional document	ies; for Indian tribal government, list ation).
Indians, Little Traverse Bay Potawatomi Indians of Michi Ste. Marie Tribe of Chippew	Community, Grand ert Band of Lake S Band of Odawa In gan, Saginaw Chi a Indians. upplemental Info	Traverse Bay superior Chippe idians, Pokago ppewa Indian T prmation for In	Band of Ottawa wa Indians, Han n Band of Potaw Tribe, Nottawase	and Chippewa Ind nahville Indian Co atomi Indians, Ma ppi Huron Band of	lians, Keweenaw Bay Indian mmunity, Little River Band of Ottawa tch-e-be-nash-she-wish Band of f the Potawatomi Indians, and Sault I information in support of this request*.

11. Programs and Areas Requested (Continued)			
Public Assistance       N/A       Image: Debris Removal (Category A)       Image: Emergency Protective Measures (Category B)       Permanent Work (Categories C-G)*         Image: Public Assistance       N/A       Image: Debris Removal (Category A)       Image: Emergency Protective Measures (Category B)       Image: Permanent Work (Categories C-G)*         Image: Debris Removal (Category A)       Image: Emergency Protective Measures (Category B)       Image: Permanent Work (Categories C-G)*         Image: Debris Removal (Category A)       Image: Permanent Work (Categories C-G)*       Image: Permanent Work (Categories C-G)*         Image: Debris Removal (Category A)       Image: Permanent Work (Categories C-G)*       Image: Permanent Work (Categories C-G)*         Image: Debris Removal (Category A)       Image: Permanent Work (Categories C-G)*       Image: Permanent Work (Categories C-G)*         Image: Debris Removal (Category A)       Image: Permanent Work (Categories C-G)*       Image: Permanent Work (Categories C-G)*         Image: Debris Removal (Categories C-G)*       Image: Permanent Work (Permanent Work (Permaent Work (Permanent Work (Permanent Work (Permanent Work (Permane			
For the following jurisdictions, specify programs and areas (counties, parishes, independent cities; for Indian tribal government, list tribe(s) and/or tribal area(s)). If additional space is needed or your request includes different categories of work for different jurisdictions; please enclose additional documentation.			
Statewide, including all counties, municipalities and tribal areas.			
For States, identify Federally-recognized Tribes included in the requested counties (if applicable).			
See above under Individual Assistance.			
Please see Enclosure B: Supplemental Information for Public Assistance for additional information in support of this request*.			
Indemnification for Debris Removal Activity			
I do not anticipate the need for debris removal.			
I anticipate the need for debris removal, which poses an immediate threat to lives, public health and safety. Pursuant to Sections 403 and 407 of the Stafford Act, 42 U.S.C. §§ 5170b & 5173, the State or Indian tribal government agrees to indemnify and hold harmless the United States of America for any claims arising from the removal of debris or wreckage for this disaster. The State or Indian tribal government agrees that debris removal from public and private property will not occur until the landowner signs an unconditional authorization for the removal of debris.			
Request for Direct Federal Assistance			
I do not request direct Federal assistance at this time.			
I request direct Federal assistance for work and services to save lives and protect property, and:			
a. I request the following type(s) of assistance: Continue Direct Federal Assistance statewide to provide augmentation to the capabilities of the state's public health system through actions such as, BUT NOT LIMITED TO: establishing temporary care and testing sites; supplying testing kits, PPE and medical equipment; providing logistics and supply chain support, including for the distribution of food and medicine to disaster victims; providing support to ensure CIKR remain operational, etc.			
b. List of reasons why State and local or Indian tribal government cannot perform, or contract for, required work and services.			
This pandemic exceeds the capabilities of our state and local governments to minimize the spread of the virus and protect public health and safety.			
c. In accordance with 44 C.F.R. § 206.208, the State or Indian tribal government agrees that it will, with respect to direct Federal assistance: (1) Provide without cost to the United States all lands, easements, and rights-of-ways necessary to accomplish the approved work; (2) Hold and save the United States free from damages due to the requested work, and shall indemnify the Federal Government against any claims arising from such work; (3) Provide reimbursement to FEMA for the non-Federal share of the cost of such work in accordance with the provisions of the FEMA-State or FEMA-Tribe Agreement ; and (4) Assist the performing Federal agency in all support and local jurisdictional matters.			
Request for Snow Assistance			
⋉ N/A I request snow assistance.			
Snow assistance for the following jurisdictions (Specify counties, independent cities or tribes and/or tribal areas).			
Please see Enclosure D: Historic and Current Snowfall Data for additional information in support of this request*.			
*Not Required for Emergency Declaration Request			

11. Programs and Areas Requested (Continued)					
Hazard Mitigation* 🔀 Statewide OR					
For the following specific counties, parishes, independent cities or tribes and/or tribal areas.					
12. Mitigation Plan Information*					
a. Mitigation Plan Expiration Date April 2024 b. Type of Plan Enhanced 🔀 Standard					
13. Other Federal Agency Programs					
I do not anticipate requirements from Other Federal Agencies					
Please see Enclosure C: Requirements for Other Federal Agency Programs for additional information in support of this request*.					
14. Findings and Certifications					
I certify the following:					
a. I have determined that this incident is of such severity and magnitude that effective response is beyond the capabilities of the State and the affected local government or Indian tribal government and that supplementary federal assistance is necessary.					
b. In response to this incident, I have taken appropriate action under State or tribal law and have directed the execution of the State or Tribal Emergency Plan on 2/28/2020 in accordance with the Stafford Act.					
c. The State and local governments, or Indian tribal government will assume all applicable non-Federal share of costs required by the Stafford Act.					
15. List of Enclosures and Supporting Documentation					
X Cover Letter      Enclosure A (Individual Assistance)*     Enclosure B (Public Assistance)*					
Enclosure C (Requirements for Other Federal Agency Programs)					
Additional Supporting Documentation Preliminary Needs Assessment					
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March 26, 2020 10:53 am					
Governor's or Tribal Chief Executive's Signature     Date					
If anyone except the Governor or Tribal Chief Executive signs this document, please provide the documentation that establishes that this individual has the legal authority to act on behalf of the Governor or Tribal Chief Executive.					

\*Not Required for Emergency Declaration Request