Department of Commerce
National Oceanic &
   Atmospheric Administration
National Weather Service

StormReady

Application Form
OMB Control # 0648-0419
Expires 06/30/2006

Community Information

County/City/Town		Population	

Primary Point of Contact

Name	
Office	
Title	
Mailing Address	
City	
State; ZIP	
Phone	
e-mail	

Secondary Point of Contact

Name	
Office	
Title	
Mailing Address	
City	
State; ZIP	
Phone	
e-mail	

Guideline 1:   Communications

Location of 24-Hour Warning Point	Location of Emergency Operations Center

Verification Team General Notes:

Renewal Comments:

	Date:	Initials:

Note: Please do not write in shaded areas.

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Guideline 2:	NWS Information Reception Equipment			
Warning Point # Required_____ # Verif_____	Verif	**EOC** # Required_____ # Verif_____	Verif
☐ NOAA Weather Radio (required if in range)	☐	☐ NOAA Weather Radio (required if in range)	☐
☐ NOAA Weather Wire (subscription)	☐	☐ NOAA Weather Wire (subscription)	☐
☐ EMWIN	☐	☐ EMWIN	☐
☐ Law Enforcement Teletype (LETS)	☐	☐ Law Enforcement Teletype (LETS)	☐
☐ Amateur Radio	☐	☐ Amateur Radio	☐
☐ Pagers* (warning reception)	☐	☐ Pagers* (warning reception)	☐
☐ Television (Local network or Cable TV)	☐	☐ Television (Local network or Cable TV)	☐
☐ Radio Station (AM/FM) - EAS Reception	☐	☐ Radio Station (AM/FM) - EAS Reception	☐
☐ NAWAS	☐	☐ NAWAS	☐
☐ Internet (subscription for alerts)_____	☐	☐ Internet (subscription for alerts)_____	☐
☐ Commercial Data Service_____	☐	☐ Commercial Data Service_____	☐
☐ Other*_____	☐	☐ Other*_____	☐
☐ Other*_____	☐	☐ Other*_____	☐

List any additional capabilities on a separate sheet

*Capabilities needing explanation:

Verification Team Notes:

Renewal Comments:

	Date:	Initials:

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Guideline 3:	Local Weather & Water Monitoring Equipment				
Warning Point # Required____ # Verif_____		Verif	**EOC** # Required_____ # Verif_____		Verif
☐ Anemometer (Wind gauge)		☐	☐ Anemometer (Wind gauge)		☐
☐ Rain Gauge		☐	☐ Rain Gauge		☐
☐ River Gauge		☐	☐ River Gauge		☐
☐ Locally owned Radar		☐	☐ Locally owned Radar		☐
☐ Internet Radar Source _____		☐	☐ Internet Radar Source _____		☐
☐ Internet Weather Station _____		☐	☐ Internet Weather Station _____		☐
☐ TV Radar Source_____		☐	☐ TV Radar Source_____		☐
☐ Other* _____		☐	☐ Other* _____		☐
☐ Other* _____		☐	☐ Other* _____		☐
List any additional capabilities on a separate sheet					

*Capabilities needing explanation:

Verification Team Notes:

Renewal Comments:

	Date:	Initials:

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Guideline 4:	**Local Warning Dissemination**				
Warning Point # Required____ # Verif_____		Verifi	**EOC** # Required_____ # Verif_____		Verifi
☐ Outdoor Warning Siren(s)		☐	☐ Outdoor Warning Siren(s)		☐
☐ Cable TV Override		☐	☐ Cable TV Override		☐
☐ Plan for Sirens on Emergency Vehicles		☐	☐ Plan for Sirens on Emergency Vehicles		☐
☐ Telephone Tree to Critical Facilities		☐	☐ Telephone Tree to Critical Facilities		☐
☐ Local Alert Broadcast System*		☐	☐ Local Alert Broadcast System*		☐
☐ Local Pager System* (dissemination)		☐	☐ Local Pager System* (dissemination)		☐
☐ Coordinated Area-Wide Radio Network*		☐	☐ Coordinated Area-Wide Radio Network*		☐
☐ Local Flood Warning System*		☐	☐ Local Flood Warning System*		☐
☐ Other*_____		☐	☐ Other*_____		☐
☐ Other*_____		☐	☐ Other*_____		☐

List any additional capabilities on a separate sheet

*Capabilities needing explanation:

Verification Team Notes:

Renewal Comments:

	Date:	Initials:

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Local Government-Owned Buildings in Which Public Traffic is Common				
Office	Location or Address	Tone Alert NOAA Weather Radio	Verif	Comments
Warning Point		☐	☐	
EOC		☐	☐	
City Hall		☐	☐	
School Superintendent		☐	☐	
		☐	☐	
		☐	☐	
		☐	☐	
		☐	☐	
		☐	☐	
		☐	☐	
		☐	☐	
		☐	☐	
		☐	☐	
		☐	☐	
		☐	☐	

Verification Team Notes:

Renewal Comments:

Date: | Initials:

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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:

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Guideline 6:	Administrative Tools/Record keeping		Verif	Renewal Year
Formal Hazardous Weather Operations Plan		☐ Yes	☐	☐ Yes
< Procedure for reporting storm damage to the local National Weather Service Office in real-time		☐ Yes	☐	☐ Yes
< EOC Activation Procedures		☐ Yes	☐	☐ Yes
< Spotter Activation Criteria		☐ Yes	☐	☐ Yes
< Local Warning System(s) Activation Criteria		☐ Yes	☐	☐ Yes
Warning Point personnel has authority to activate Warning System (written)		☐ Yes	☐	☐ Yes
Spotter Roster and Training Record		☐ Yes	☐	☐ Yes
Last Visit by Emergency Manager to NWS Office			☐ Biennial	
Last Visit by NWS Officials to Community			☐ Annual	
Last NWS Spotter Training for Spotters and Dispatchers			☐ Biennial	
Last NWS Spotter Training Hosted/Co-Hosted *(For populations >40,000)*			☐ Annual	
Exercises	Topic(s):	Date:	☐	Date:

List any additional descriptions, narratives, or documentation on a separate sheet

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:

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Site Verification Team Signatures	
Print Name:	
Office:	Title:
Signature:	Date:
Print Name:	
Office:	Title:
Signature:	Date:
Print Name:	
Office:	Title:
Signature:	Date:
Print Name:	
Office:	Title:
Signature:	Date:

Signature in Renewal Year	
Application Submitted by: (print name):	
Office:	Title:
Signature:	Date:
NWS Personnel Receiving Application (print name):	
Date Received:	