

(Date)

Name/address

Dear \_\_\_\_\_,

As part of the PDM/Hazard Mitigation Grant process, a local funding match is required. This letter serves as \_\_\_\_\_ (Applicant/Subgrantee), commitment to meet the matching fund requirements for the \_\_\_\_\_ (type of project) PDM/Hazard Mitigation Program project. The local matching fund requirement is \$\_\_\_\_\_. If additional funds are requested, additional local match fund commitment letter is required to be submitted.

Attached is the \_\_\_\_\_ (Applicant/Subgrantee), Resolution of Commitment as authorized by the \_\_\_\_\_ (i.e., County Commissioners). It is understood that a portion of the non-federal share of the PDM/HMGP projects will be contributed by the State of \_\_\_\_\_.

Your assistance is greatly appreciated.

Sincerely,

\_\_\_\_\_  
(Name)  
(Title)