

**FISCAL YEAR 2018  
DESIGNATION OF EMPG GRANT OFFICIALS**

**APPLICANT NAME (JURISDICTION):**

<b>EMERGENCY MANAGEMENT COORDINATOR*</b>	
<b>NAME</b>	<input type="checkbox"/> Mr. <input type="checkbox"/> Ms. *If newly appointed, attach form TDEM-147
Official Mailing Address <b>Please include ZIP + 4</b>	
Daytime Phone Number	(     )                                  Alternate Number (     )
Fax Number	(     )
E-mail Address	

<b>POINT OF CONTACT (RESPONSIBLE FOR APPLICATION)</b>	
<b>NAME</b>	<input type="checkbox"/> Mr. <input type="checkbox"/> Ms.
Title	
Official Mailing Address <b>Please include ZIP + 4</b>	
Daytime Phone Number	(     )                                  Alternate Number (     )
Fax Number	(     )
E-mail Address	

<b>GRANT FINANCIAL OFFICER (CANNOT BE THE SAME AS EMC)</b>	
<b>NAME</b>	<input type="checkbox"/> Mr. <input type="checkbox"/> Ms.
Title	
Official Mailing Address <b>Please include ZIP + 4</b>	
Daytime Phone Number	(     )
Fax Number	(     )
E-mail Address	

<b>AUTHORIZED OFFICIAL (MAYOR, COUNTY JUDGE, CITY MANAGER)</b>	
<b>NAME</b>	<input type="checkbox"/> Mr. <input type="checkbox"/> Ms.
Title	
Official Mailing Address <b>Please include ZIP + 4</b>	
Daytime Phone Number	(     )
Fax Number	(     )
E-mail Address	