

**NOAA/NWS TSUNAMI ACTIVITIES GRANTEE
NEPA/HISTORICAL REVIEW CHECKLIST
For FY24 NOAA/NWS Grant Cycle
Funding Opportunity Number: (to be assigned)**

Applicant agency name: _____

Review all questions below. If all answers are “no”, then use Section A: Short Form. If any answer to any item is “yes”, then use Section B: Long Form.

SECTION A – SHORT FORM

We have reviewed all questions listed in Section B and affirm that all answers to all questions are “NO” for all tasks for this grant application.

Name: (print) _____

Signature: _____

Title: _____

Date: _____

SECTION B – LONG FORM

Does any task or subtask in your grant application:

ITEM	YES	NO
1. Have a requirement or potential to require a federal permit?		
2. Have any other federal agency direct involvement, activity, oversight, or funding?		
3. Establish a precedent or represent a decision in principle about future grant and award actions with potentially significant environmental effects?		
4. Have reasonably foreseeable actions resulting in cumulatively significant environmental impacts even if proposed task's effects may be individually insignificant?		
5. Have significant effects on public health or safety?		
6. Create high levels of noise for an extended period of time?		
7. Have long or short term aesthetic effects, e.g., visual effects or effects on scenery?		
8. Require large amounts of outdoor lighting or create any unusual odors?		
9. Require large amounts of water or electricity for an extended period or time?		
10. Have long or short term effects on the transportation infrastructure, or create a significant increase in local traffic?		

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11. Have significant adverse impacts on any geographic area(s) with unique characteristics? Areas to consider include coral reefs, marine protected areas, marine sanctuaries, essential fish habitat, historic or cultural resources, park or refuge lands, wild or scenic rivers, wetlands, or ecologically significant or critical areas, including those listed on the National Register of Natural Landmarks, or listed or eligible for listing on the National Register of Historic Places.

a. Degrade or disturb coral reefs?		
b. Degrade or disturb previously undisturbed areas?		
c. Affect any areas such as wetlands and flood plains?		
d. Disturb archaeological or historic resources?		

12. Have highly uncertain and potentially significant environmental effects or involve unique or unknown risks?

a. Potentially result in the introduction or spread of a non-indigenous species?		
b. Involve aquaculture activities that could result in the introduction or spread of invasive or non-indigenous species?		
c. Significantly impact water resources such as surface or groundwater?		
d. Significantly contribute to water degradation or impairment?		
e. Generate large amounts of hazardous waste or any toxic waste?		
f. Emit dangerous levels of ionizing or non-ionizing radiation?		
g. Result (directly or indirectly) in the generation of large amounts of air pollution?		
13. Have adverse effects on species listed or proposed to be listed as Endangered or Threatened, or have adverse effects on designated critical habitats?		
14. Will this grant threaten to violate a Federal state, local, or tribal law imposed for the protection of the environment?		
15. Will this NOAA grant have highly controversial environmental effects (i.e., are the effects likely to be subject to serious scientific dispute)?		

IF YES WAS CHECKED FOR ANY OF THE ITEMS ABOVE: Please add pages as necessary. List the item number, related grant application task number, and provide additional information about anticipated environmental impacts as well as alternatives explored and why this task in this location is necessary. Provide a plan to conduct required environmental assessments to determine requirements for mitigation environmental impact. Failure to provide complete answers to these issues may result in the award for the subject task to be withheld pending further review and approval, or not to be made.

Explanatory information:

Name: (print) _____

Signature: _____

Title: _____

Date: _____