

DEBRIS MANAGEMENT FORM

This form contains the information that FEMA requests from DNR when considering reimbursement requests. Please send this form to your Local DNR Field Office. DNR will send an approval letter to the applicant that can be used for FEMA reimbursement. DNR Field Office contact information can be found at https://www.iowadnr.gov/fieldoffice.

It is the applicant's responsibility to comply with all other applicable federal, state, or local statutes, rules, regulations, ordinances, and orders.

Applicant:	County:
Primary Contact Person:	Phone:
Address:	
City: Zip Code:	Fax:
Email:	
Debris Disposition (check all that apply, describe each activity, and	provide location in the box below)
Chipping/Grinding Vegetation for Reuse (mulch or other be	eneficial use)
Chipping/Grinding Structural Material for Landfill Disposal	
Temporary Debris Management Site (TDMS) - Emergency S	olid Waste Transfer Permit may be required.
Landfill (enter permit number & name)	
Burning of non-asbestos disaster debris (during disaster pr	oclamation)
Burning of tree and tree trimmings	
Temporary Transfer Station/Construction & Demolition Re	covery Site/Material Recycling Site
Other (attach detailed explanation for review):	
ASH from all burn types	
-Landfill (enter permit number & name below)	
-Land application/incorporation	
-Reuse	
Example - TYPE OF DEBRIS DISPOSAL ACTIVITY (Checked option above): Vegetative Debris Chipping
Address/Location: 123 E West Rd, City	GPS (decimal degrees): 41.59217, -93.60735
1. TYPE OF DEBRIS DISPOSAL ACTIVITY:	

Address/Location:	GPS (decimal degrees):
2. TYPE OF DEBRIS DISPOSAL ACTIVITY:	
Address/Location:	GPS (decimal degrees):
3. TYPE OF DEBRIS DISPOSAL ACTIVITY:	
Address/Location:	GPS (decimal degrees):
For additional sites, attach additional sheets	

Signature and Title

Date