



IPWMAN Application Submission Checklist

Date: _____

Agency: _____

Form Completed by: _____

Population Served: _____

Membership Dues: _____

	YES	NO	Comments
1. Mutual Aid Completed and Signed by Agency? (Please send two (2) originals—one will be returned to you.)	<input type="checkbox"/>	<input type="checkbox"/>	_____
2. Did you make any changes to the Mutual Aid Agreement?	<input type="checkbox"/>	<input type="checkbox"/>	_____
3. Did you include check payable to IPWMAN for dues?	<input type="checkbox"/>	<input type="checkbox"/>	_____
4. Did you include a copy of the approved ordinance/resolution for IPWMAN?	<input type="checkbox"/>	<input type="checkbox"/>	_____
5. Did you contact your emergency management official, complete their resource survey, and send it to them? (Make a copy of survey for your files.)	<input type="checkbox"/>	<input type="checkbox"/>	_____
6. Did you complete the Emergency Contact Form?	<input type="checkbox"/>	<input type="checkbox"/>	_____
7. Is anyone interested in working on an IPWMAN Committee? (Please write their name in the space to the right.)	<input type="checkbox"/>	<input type="checkbox"/>	_____

For Official Use Only

	Yes	No	Comments	
MAA approved/signed	_____	_____	_____	Date Reviewed: _____
Ordinance approved	_____	_____	_____	Reviewed by: _____
Dues Paid	_____	_____	_____	Agency approved – Yes/No
Resource Survey included	_____	_____	_____	Date Approved: _____
Emergency Contact Form	_____	_____	_____	
Application Approved	_____	_____	_____	
PWMAN sign application	_____	_____	_____	
Return sign app to agency	_____	_____	_____	
