

New Form

U. S. DEPARTMENT OF HOMELAND SECURITY
FEDERAL EMERGENCY MANAGEMENT AGENCY
REQUEST FOR HOUSING ACCOMMODATIONS

O.M.B. NO. 1660-0029
Expires June 30, 2007

PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for this form is estimated to average 6 minutes per response. Burden means the time, effort, and financial resources expended by persons to generate, maintain, retain, disclose, or to provide information to us. You may send comments regarding the burden estimate or any aspect of the form, including suggestions for reducing the burden to: Information Collections Management, U. S. Department of Homeland Security, Federal Emergency Management Agency, 500 C Street, SW, Washington, DC 20472 Paperwork Reduction Project (1660-0029). You are not required to respond to this collection of information unless a valid OMB control number appears in the upper right corner of this form. Please do not send completed form to the above address.

PRIVACY ACT STATEMENT

General - This information is provided pursuant to Public Law 93-579 (Privacy Act of 1974), December 31, 1974, for individuals applying for housing at the National Emergency Training Center.

Authority - Public Law 93-498, 15 U.S.C.A. 2206, 5 Up. So. CA. 301, 44 Up. So. CA. 3101, 50 Up. So. CA. Ape. 2253, E.O. 12127 and E.O. 12148.

Purposes and Uses - The principal purpose of the information requested on this form will be used to assign housing at the National Emergency Training Center. Information such as sex is necessary because the accommodations are of the dormitory type and it is necessary to separate individuals by sex. Information will only be used or released as permitted by law.

Effects of Nondisclosure - Personal information provided in this form is given on a voluntary basis as is assignment of housing. Failure to provide this information, however, may result in the inability to assign housing.

Information Regarding Disclosure of Your Social Security Number (SSN) under PL 93-579, section 7(b) - Solicitation of the SSN is authorized under provisions of E.O. 9397, dated November 22, 1943. The disclosure of the SSN is voluntary and is only for record keeping purposes. The SSN is used as an identifier to match the person requesting housing with the correct master record in order to better assist in assigning housing to students and guests. The use of the SSN is necessary because of the large number of individuals who have identical names and whose identities can only be distinguished by the SSN.

STATUS: FEMA Employee* Contract Instructor Contractor Other Specify _____

* Must present a copy of travel authorization or invitational travel, if applicable, at the time of registration.

DATE OF ARRIVAL	DATE OF DEPARTURE	NAME OF INDIVIDUAL REQUESTING HOUSING
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PURPOSE OF VISIT

IT IS REQUESTED THAT THE FOLLOWING PEOPLE BE PROVIDED HOUSING AT NETC

NAME OF INDIVIDUAL	Personal Identification Number	PURCHASE ORDER NUMBER (if any)	Gender (M/F)	HANDICAPPED (Y/N)

SPECIAL ACCOMMODATIONS NEEDED

I certify that the housing requested above is accordance with FEMA instructions covering housing policy will be paid in accordance with e NETC fee schedule at NETC.	SIGNATURE (Individual Requesting Housing)
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APPROVED <input type="checkbox"/> YES <input type="checkbox"/> NO	SIGNATURE (NETC Program Office Head or Official Designee)	SIGNATURE (Director, NETC Management and Operations or designee)
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BILLING INFORMATION NETC USE ONLY	<input type="checkbox"/> Exempt from payment	<input type="checkbox"/> Must pay prevailing rate
	<input type="checkbox"/> Housing included in cost	<input type="checkbox"/> Housing not included in cost