DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY RENTED EQUIPMENT SUMMARY RECORD						PAGE	OF	O.M.B. No. 1660-0017 Expires October 31, 2008	
APPLICANT	PA ID NO.		PROJECT NO.	PROJECT NO.		-			
LOCATION/SITE			CATEGORY	CATEGORY F		PERIOD COVERING			
DESCRIPTION OF WORK PERFORMED					,	'			
TYPE OF EQUIPMENT Indicate size, Capacity, Horsepower Make and Model as Appropriate	DATES AND HOURS USED	RATE PER HOUR		TOTAL				DATE AND AMOUNT	
		W/OPR	W/OUT OPR	COST	VENDOR		INVOICE NO.	PAID	CHECK NO.
		_							
		_							
		_							
GRAND TOTAL ————————————————————————————————————									
	THE ABOVE INFORMATI			OLL RECORDS, IN	VOICES, OR OTHER DOCUM	ENTS THAT ARE A	VAILABLE FOR AU	JDIT.	
CERTIFIED	TITLE					DATE			

PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for this form is estimated to average 30 minutes per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the needed data, and completing, reviewing, and submitting the form. You are not required to respond to this collection of information unless it displays a valid OMB control number. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing this burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 500 C Street, SW, Washington, DC, 20472, Paperwork Reduction Project (1660-0017). Submission of the form is required to obtain or retain benefit under the Public Assistance Program. **Please do not send your completed form to the above address.**