

DEPARTMENT OF HOMELAND SECURITY
 FEDERAL EMERGENCY MANAGEMENT AGENCY
REQUEST FOR THE SITE INSPECTION

SITE CONTROL No.
 (As Assigned)

REGISTRATION No.

See Reverse Side
 for Paperwork
 Burden Notice

O.M.B. No. 1660-0030
 Expires November 30, 2010

SITE INFORMATION

APPLICANT INFORMATION

SITE ADDRESS (House No. & Street Name)

NAME (Last, First, Middle Initial)

CITY AND STATE

COUNTY

CURRENT ADDRESS (House No. & Street Name)

NAME OF LANDOWNER

CITY AND STATE (Include Zip Code)

ADDRESS OF LANDOWNER

Primary:

Alternate:

Primary:

Alternate:

- EGSS Group
 Private Commercial

TEMPORARY HOUSING UNITS
 REQUIRED (Check One)

- 1 2 3

- MH TT
 PM UFAS

SITE UTILITY INFORMATION (Completed by THP contact through inquiry to applicant)

- Natural
 LP None

- Public
 Well None

- Public
 Septic None

RAMP

ADA/UFAS Compliant Unit

___ MALE ___ FEMALE

YES

NO

___ MALE ___ FEMALE

LANDOWNER AVAILABLE TO ACCOMPANY
 INSPECTOR TO SITE YES NO

APPLICANT SIGNATURE

DATE

SITE DESCRIPTION AND DIRECTIONS (Form DFO to Site- attach map if necessary)

NAME OF SITE INSPECTOR (Assigned by DHOP's Chief)

DATE ASSIGNED

DATE

TIME

- Within Outside Restricted Zone

Flood Zone Map No. _____

1st Choice

2nd Choice

APPLICANT ACTIONS TO MAKE SITE ACCEPTABLE

- Site Feasible FF90-31, Landowner's Authorization/Ingress-Egress Agreement FF90-96, Mobile Lease
 Site Infeasible (State reason)

SIGNATURE OF SITE INSPECTOR

DATE

APPLICANT NOTIFIED OF SITE DETERMINATION

Date:

By:

PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for this form is estimated to average 10 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 a valid OMB control number appears in the upper right corner of this form. 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 (1660-0030). **Please do not send your completed survey to the above address.**