

LOCAL GOVERNMENT RESOLUTION - COLLATERIAL SECURITY

RESOLUTION

BE IT RESOLVED BY _____ OF _____
(Governing Body) (Public Entity)

THAT we pledge the following listed collateral security to the Department of Homeland Security/Federal Emergency Management Agency (DHS/FEMA) on the Promissory Note for a Community Disaster Loan for \$ _____ executed on _____, 20 ____ pursuant to Section 417 of the Robert T. Stafford Relief and Emergency Assistance Act, Public Law 93-288, as amended, and FEMA Regulation, 44 CFR 206, Subpart K. We further understand that failure to repay any outstanding principal and related interest on those portions of the loan which do not qualify for loan cancellation as determined by DHS/FEMA or any successor agency will result in forfeiture of as much as the listed collateral security as is necessary to collect such outstanding principal and interest. (List the collateral security below. Use additional sheets if needed.)

List the collateral security

Passed and approved this _____ day of _____, 20 _____.

(Name and Title)

(Name and Title)

(Name and Title)

CERTIFICATION

I, _____, duly appointed and _____ of _____
(Title)

_____, do hereby certify that the above is a true and correct copy of a

resolution passed and approved by the _____ of _____
(Governing Body) (Public Entity)

on the _____ day of _____, 20 _____.

DATED: _____

(Official Position)

(Signature)

[SEAL]

RECORDED

I, _____, _____, a responsible and
(Name) (Title)
authorized official of _____, do hereby attest that the
(Public Entity)
Collateral Security Resolution which accompanies this form has been duly recorded at _____

(Indicate where Recorded)

The Collateral Security Resolution was recorded on the _____ day of _____, 20 ____ .

DATED: _____

(Official Position)

(Signature)

[SEAL]

PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for this data collection is estimated to average 10 hours per response. The burden estimate includes time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and submitting this form. You are not required to respond to this collection of information unless a valid OMB control number is displayed on this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing the burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 1800 South Bell Street, Arlington, VA 20598-3005, Paperwork Reduction Project (1660-0017). **NOTE: Do not send your completed questionnaire to this address.**

PRIVACY NOTICE

This information is being collected under the authority of Section 417 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, Public Law 93-288, as amended, (42 U.S.C. 5121-5207), and 44 CFR, § 206.364. DHS/FEMA will use this information to provide operational funding to help local governments that have incurred a significant loss in revenue, due to a major disaster, that has or will adversely affect their ability to provide essential municipal services. The information will be used by and disclosed to DHS personnel and contractors, state government officials, or other agents who need the information to assist in activities related to disaster relief. In addition, the information on this form may be disclosed as generally permitted under the Freedom of Information Act, as amended (5 U.S.C. § 552). Furnishing this information is voluntary; however, failure to furnish the requested information may delay or prevent the completion of your loan application and disbursement.