



#### Search for My Family and Friends

Step 1 of 5

On the following screens you will be asked to:

- Read and accept information regarding the Privacy Act and routine use of information entered in the system
  Provide information (e.g., name, gender, date of birth, permanent address), that will be used to confirm your identity
  (The information will be sent to a third party for verification.)
- Perform a Search for your Friends and Family, by providing (for each individual you want to find)
  - o First and Last Name
  - Information about permanent residence (Country, State, City)

Home I Am A New User

I Am A Returning User With A Password

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Español |Register/Search by Phone

# National Emergency Family Registry and Locator System (NEFRLS)



## **Burden of Disclosure Notice**

NEFRLS search requires an average of 5 minutes.

Please click Save & Continue to proceed with search.

PAPERWORK BURDEN DISCLOSURE NOTICE 528-2

 $Public \, reporting \, burden \, of this \, data \, collection \, is \, estimated \, 5 \, minutes \, per \, response. \, The \, burden \, estimate \, includes \, the \, time \, and \, burden \, estimate \, includes \, the \, time \, and \, burden \, estimate \, includes \, the \, time \, and \, burden \, estimate \, includes \, the \, time \, and \, burden \, estimate \, and \, burden \, esti$ 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 OME 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, 500 C Street, SW, Washington, DC 20472, Paperwork Reduction Project (1660 -0108) NOTE: Do not send your completed form to this address.

Exit

Save and Continue

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#### **NEFRLS Privacy Act Statement**

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Authority Robert T. Stafford Disaster Relief and Emergency Assistance Act, Sect. 689c (6 U.S.C. 775)

The primary use of this information is to facilitate reuniting displaced individuals, including medical patients, with their families following a major disaster or emergency declared by the President under the Stafford Act Disclosures of this information may be made. Upon written request, to federal and state agencies providing disaster assistance, as well as to local governments, voluntary agencies, law enforcement agencies or professional organizations and to individuals identified by the person registering in this system, for the purpose of reuniting families; or to a Congressional office in response to an inquiry made afthe request of the individual, and to the National Archives and Records Administration in records management inspections conducted under the authority of 44 U.S.C. §§ 2904 and 2906.

\* I have read and accept the terms of the Privacy Act, above.

#### NEFRLS Use of Information

Personal information will be requested from or about the displaced individual registering in this system, household members traveling with the person registering and from the individual searching the system for a displaced individual, for the purpose of identity verification and for the security of the individual registering. Registration of your personal information is undirary, but failure to provide certain information or failure to pass the security process will prevent you from registering in this system and/or prevent you from receiving information on a registered individual information on this system will only be available for up to 60 days after registration at which time a new registration would be required.

\* 7 I am voluntarily entering information into the NEFRLS system and lagree to waive any and all liability of the U.S.

Government and hold the U.S. Government harmless for the improper or proper use of the information in the NEFRLS system.

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#### National Emergency Family Registry and Locator System (NEFRLS)

#### Begin Identity Verification

Step 3 of 5

Please complete the data fields (boxes) below. This information will be sent to and used by a third party (e.g. ChoicePoint) to confirm your identity.

My Personal Information



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### Continue Identity Verification

The information below will be sent to a third party for verification, please confirm that it is complete and accurate.

## Your Information

First Name: Middle Name:

Last Name: Date of Birth: Jan 1 1987 Address line 1: 123 Testing Lane

Address line 2:

United States Country: State: VA County/Parish: City: ABINGDON

ZIP/Postal Code: 11111

Edit Exit Next

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## National Emergency Family Registry and Locator System (NEFRLS)

### Continue Identity Verification

Step 3 of 5

Step 3 of 5

Clicking the "Submit" button will send your information to a third party to begin the identity verification process.

You will then be asked a series of questions to confirm your identity. These questions are based on the information you provided and other data stored in publicly accessible databases.

To terminate the registration process, click on the "Exit" button, and you will be redirected to the homepage.

Exit Submit

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### Your Identity Could Not Be Verified

Step 3 of 5

#### Option 1 - Retry Third Party Verification

The failure to verify your identity may be due to data entry errors or recent changes to address or name.

- Verify the spelling of your name. If you changed your name recently, try entering your previous name. If you used a nickname, please enter your name as it appears on your driver's license.
- Confirm your address. Please verify that the spelling and order of your address is the same as it appears on your mail If you have changed your address recently, try entering your previous address.

Try Again

### Option 2 - Use Alternate Validation

 $You\ will be asked to choose five (5) questions and answers about yourself. Access to your information will only be allowed if the individual seeking you correctly answers these questions.$ 

Alternate Validation Exit

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## National Emergency Family Registry and Locator System (NEFRLS)

### Alternate Validation



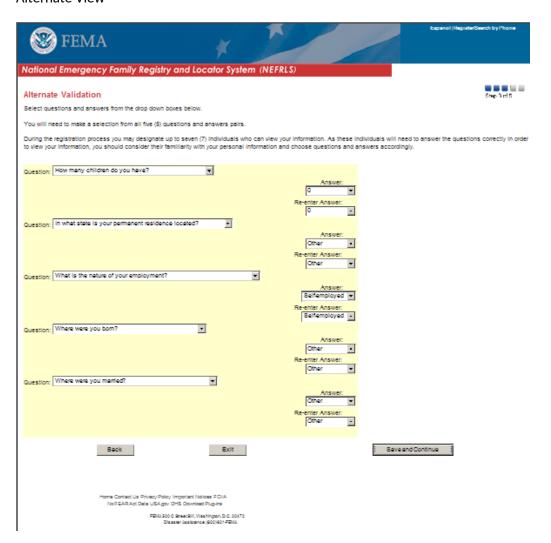
Select questions and answers from the drop down boxes below.

You will need to make a selection from all five (5) questions and answers pairs.

During the registration process you may designate up to seven (7) individuals who can view your information. As these individuals will need to answer the questions correctly in order to view your information, you should consider their familiarity with your personal information and choose questions and answers accordingly.

Question:	- Select One -	
		Answer.
		Re-enter Answer.
		Re-cittel Allswei.
Question:	- Select One -	
		Answer
		•
		Re-enter Answer.
Ouestion:	- Select One -	1
QUOSIIOTI.		Answer.
		-
		Re-enter Answer.
	- Select One -	
Question:	- Select One -	Answer:
		× 115 W 01.
		Re-enter Answer.
Question:	- Select One -	
		Answer.
		Do cotos Acousos

## Alternate View





### **Confirm Alternate Validation Questions**

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Please confirm that your answers are accurate. If you are satisfied with your choices, click the "Save and Continue" button.

If you would like to make changes, click the "Edit" button.

#1 How many children do you have?

#2 In what state is your permanent residence located?

#3 What is the nature of your employment?

#4 Where were you born?

Where were you married?

Edit

#5

Exit

Save and Continue

0

Other

Other

Self-employed

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## National Emergency Family Registry and Locator System (NEFRLS)

## Your Identity Has Been Verified



You now have the option to create a username and password. This will enable you to access NEFRLS without going through the identity verification process on subsequent visits.

If you choose not to create a username and password at this time, you may continue with your search during this session. However, you will be required to complete the identity verification process should you choose to access NEFRLS in the future.

Create Usemame And Password

Continue Without Usemame And Password

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### Search For My Family And Friends

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When completing the fields below:

Please verify that the spelling of the first and last name is complete and accurate, as matches must be exact

Please use the permanent (pre-disaster) place of residence for Country, State and City.

You may search as many times as you want

When you have finished searching, click Exit to return to the homepage.

* First Name of Displaced Person:	Ja ne
* Last Name of Displaced Person:	Doe
Permanent (Pre-disaster) Country of Displaced Person:	United States
* Permanent (Pre-disaster) State of Displaced Person:	DC 🔻
Permanent (Pre-disaster) County of Displaced Person:	-All-
* Permanent (Pre-disaster) City of Displaced Person:	WASHINGTON
	Search Exit

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# Search For My Family And Friends

### Jane Doe's Information

Current Location and Contact Information

Message

We are safe in the shelter.

#### Contact Information:

Name of Location: Test Shelter
Address Line 1: 123 Testing Dr.

Address Line 2:

State of Residence: ID

City of Residence: ACKLEY

County/Parish of Residence:

ZIP/Postal Code: 11111

Primary Phone: 111-111-1111
Secondary Phone: 111-111-1111

### Additional family/household members traveling with registrant

FirstName: Janie LastName: D

# **Alternate View**





## Search for My Family and Friends: Send a Message

Step 4 of 5

Save and Continue

You may create a message of up to one hundred and forty (140) characters in length that will be sent to the person whose record you have viewed.

#### **DISCLAIMER NOTICES**

#### Please read the following disclaimers.

Please read the innowing disclaimers.

By electing to send an SMS message, you may incur text message charges directly from your wireless provider. NEFRLS, FEMA, and/or DHS are not responsible for any charges charged by your wireless provider while sending or receiving SMS messages through the NEFRLS system. Please check with your wireless provider for information regarding charges to sending or receiving text messages. Any inapropriate use of the NEFRLS text messaging system, including but not limited to abusive and/or inappropriate language and disclosure of personal or sensitive information, is strictly prohibited. FEMA is not responsible for any information you may choose to communicate through the NEFRLS text messaging system. The recipient may not receive this message if they do not have a permanent phone, or listed an incorrect phone number or email address. In addition, the recipient will be able to see the message you enter when they log back in to view their registration. The system administrator may be able to read sent messages.



Characters remaining: 140

Back Exit

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You are about to exit NEFRLS.

# National Emergency Family Registry and Locator System (NEFRLS)

If you did not intend to Exit, click Back to return to the previous screen.	Back

If you choose to exit now and did not create a username and password you will be required to re-register (including completing the identify validation process) should you choose to access the NEFRLS system in the future.

Would you like to create a user name and password now? Create Username And Password

If you do not want your record to be accessible to searchers, click Suspend This

Registration Suspend This Registration

To end your current session in NEFRLS, click Exit

To return to the homepage and continue your current session, click Home.

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