# FEMA Form 010-0-12, (English) Application for Continued Temporary Housing Assistance

| LOCATION | CURRENT TEXT | REVISED TEXT |
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| Page 1, Paragraph 4 | Delete "auto-generated" | Replace with "filled-in" |
| Page 1, Paragraph 5 | Delete "auto-generated" | Replace with "filled-in" |
| Page 1, Paragraph 5 | Delete "you may move on" | Replace with "please continue" |
| Page 1, Paragraph 7 | "Current Phone" | Format change – underline "Current Phone" |
| Page 1, Paragraph 8 | Delete "monetary" | Replace with "dollar" |
| Page 1, Paragraph 9 | Next to the appropriate "Expense" enter the dollar amount of your bill or payment. | Format change – unbold text |
| Page 1, Paragraph 10, 1st sentence | Delete "the" | Replace with "each" |
| Page 1, Paragraph 10, after 1st sentence add new sentence | Insert new text. | Insert: This would include documents such as your mortgage statement, rent receipts and utility bills. |
| Page 1, Paragraph 10 | Shade in the circle next to the "Expense" indicating that you have attached the document to your application. You must submit documentation that can be validated; otherwise the amount will not be accepted. | Format change – unbold text |
| Page 1, Paragraph 10 | Delete "validated" | Replace with "verified" |
| Page 1, Paragraph 11 | Delete "To ensure proper calculation and evaluation of your Housing Costs, please" | Replace with "Under Payment Cycle," |
| Page 2, Paragraph 2 | Delete the colon – "Housing Cost:" | Replace with "Housing Cost" |
| Page 2, Paragraph 3 | Delete the colon – "Housing Unit:" | Replace with "Housing Unit" |
| Page 2, Paragraph 3 | Delete "hotel, motel" | No new language will be inserted. |
| Page 2, Paragraph 4 | Delete "If you are in a Housing Unit" | No new language will be inserted. |
| Page 2, Paragraph 4, 1st sentence | Insert new language - copy of your **written and signed** lease, | Insert and bold "written and signed" |
| Page 2, | Insert new language - The lease must be signed by the applicant or co- | Insert new |

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| Paragraph 4 | applicant and the landlord. | language - The lease must be signed by the applicant or co-applicant and the landlord. |
| Page 2, Paragraph 5 | Delete "residing" | Replace with "currently living with you" |
| Page 2, Paragraph 5 | Delete "current" | No new language will be inserted. |
| Page 2, Paragraph 6, 1st sentence | Delete "validate any" | Replace with "verify each dollar" |
| Page 2, Paragraph 6, 1st sentence | Delete "the frequency at which the" | Replace with "how often each" |
| Page 2, Paragraph 6, 2nd sentence | Delete "In the pay cycle box, please shade in the circle that is applicable." | Replace with "Shade in the circle indicating you have attached a document to your application." |
| Page 2, Paragraph 7, 1st sentence | Delete "To ensure proper calculation and evaluation of your Households Income, please". | No new language will be inserted. |
| Page 2, Paragraph 7, 1st sentence | Delete "you are" | Replace with "each individual is" |
| Page 2, Paragraph 7, 1st sentence | Insert new language at the end of 1st sentence "paid by his or her employer." | Insert new language at the end of 1st sentence "paid by his or her employer." |
| Page 2, Paragraph 7, 2nd sentence | Delete "you have" | Replace with "an individual has" |
| Page 2, Paragraph 7, 2nd sentence | Delete "yourself" | Replace with "them" |
| Page 2, Paragraph 7 | Format change – unbold text | Format change – unbold text |
| Page 2, Paragraph 8 | Format change – unbold text | Format change – unbold text |
| Page 2, Paragraph 8 | Delete "your" and make Pay Cycle lower case | Replace with "the" and "pay cycle" |
| Page 2, Paragraph 9 | Format change – unbold text | Format change – unbold text |
| Page 2, Paragraph 9 | Delete "FEMA will calculate the income to a Monthly cycle" | No new language will be |

| | | inserted. |
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| Page 2, Paragraph 10 | Delete "Persons" | Replace with "All Individuals" |
| Page 2, Paragraph 10 | Delete "Residing" | Replace with "Living" |
| Page 2, Paragraph 10 | Delete "Bi-Monthly" | Replace with "Twice Monthly" |
| Page 2, Paragraph 11 | Delete the colon – "Income means:" | Replace with "Income means" |
| Page 2, Paragraph 12 | Delete "post-disaster" | Replace with "permanent" |
| Page 2, Paragraph 15 | Insert new text at the end of the paragraph "(e.g. pay stubs, mortgage statements, lease, utility bills, rent receipts, etc.)" | Insert new text at the end of the paragraph "(e.g. pay stubs, mortgage statements, lease, utility bills, rent receipts, etc.)" |
| Page 3, Privacy Act Statement | **Delete existing statement and replace with this statement:**<br><br>**AUTHORITY**: The Robert T. Stafford Disaster Relief and Emergency Assistance Act as amended, 42 U.S.C. §§ 5121 -5207; The Homeland Security Act of 2002, 6 U.S.C. §§ 311-321j; Reorganization Plan No. 3 of 1978; 4 U.S.C. §§ 2904 and 2906; 4 C.F.R. § 206.2(a)(27); the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (Pub. L. 104-193); and Exec. Order No. 13411.  DHS asks for your SSN pursuant to the Debt Collection Improvement Act of 1996, 31 U.S.C. §§ 3325(d) and 7701(c) (1).<br><br>**PRINCIPAL PURPOSE(S)**: FEMA collects and maintains your information in order to determine eligibility for and administer financial assistance under a Presidentially-declared disaster. Additionally, FEMA may review your information for quality assurance purposes to assess FEMA's disaster assistance customer service.<br><br>**ROUTINE USE(S)**: FEMA may be share your personal information contained in your disaster assistance file outside of FEMA as generally permitted under 5 U.S.C. § 552a(b) of the Privacy Act of 1974, as amended. This includes sharing your personal information with federal, state, tribal, local agencies and voluntary organizations to enable you to receive additional disaster assistance, to prevent duplicating your benefits, as necessary and authorized by routine uses published in DHS/FEMA-008 Disaster Recovery Assistance Files Notice of System of Records, 78 Fed. Reg. 25,282 (Apr. 30, 2013) and upon written request, by agreement or as required by law. | |
| Page 3, Important | Insert "Temporary Housing" | "….Continued Temporary |

| Notice | | Housing Assistance." |
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| Page 3, Important Notice | Delete "Recovery Strategy" | Replace with "Permanent Housing Plan" |
| Page 3, Important Notice | Insert "rent receipts" | Insert "….current lease, rent receipts/cancelled checks…" |
| Page 3, Item 7 | Delete "of Expenses" | No new language will be inserted. |
| Page 4, Item 9 | Delete "Persons" | Replace with "All Individuals" |
| Page 4, Item 9 | Delete "Residing" | Replace with "Living" |
| Page 4, Item 9 | Delete "Bi-Monthly" | Replace with "Twice Monthly" |
| Page 4, Item 10 | Delete "Recovery Strategy" | No new language will be inserted. |
| Page 4, Item 10 | Insert "pre-disaster" | Insert "I am a pre-disaster RENTER…" |
| Page 4, Item 10 | Insert "pre-disaster" | Insert "I am a pre-disaster HOMEOWNER …" |
| Page 4, Item 11 | Capitalization.  Capitalize "continued" | Insert "Continued" |
| Page 4, Item 11, 4th bullet | Delete "means" | Replace with "ability" |