DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency

OMB Control Number: 1660-0082 APPLICATION FOR LOAN CANCELLATION Expiration: 06-30-2016 PAPERWORK BURDEN DISCLOSURE NOTICE Public reporting burden for this form is estimated to average 1 hour 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 the burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 500 C Street, SW, Washington, DC 20472, and Paperwork Reduction Project (1660-0082). Note: Do not send your completed form to this address. FOR FEDERAL GOVERNMENT USE ONLY 1. Entity name, authorized representative, mailing address, phone, contact e-mail Loan Number CDL **Disaster Declaration Date**

2. Total Approved Loan Amount	3. Date Promissory Note Execute		ed 4. Term of Loan		5. Interest Rate		
	SUMMARY O	F CANCELLATION	ON INFORMATI	ON			
P	Fiscal Year receding Disaster	Fiscal Year of Disaster	Disaster FY+1		Disaster FY+3	TOTAL Post Disaster	
6. Fiscal Year End Date							
7. Total Operating Revenues							
8. Operating Expenses (less UDRE if used)							
Un-reimbursed Disaster Related Expenses							
10. Total Operating Expenses [8 + 9]							
11. Net Operating Surplus or (Deficit) [7 - 10]							
12. Total CDL Funds Drawn							
13. Cancellation Request (Total of line 11	deficit, up to amou	nt of CDL, line 12	2)				
Based on the information contained in the A 20 and the information furnished loan already made as a result of the loss ca Signature of Applicant	above apply for loa	an cancellation in	the amount of	-		nection with the	
		FORWARDE	D		Date		
Name and Title of Approval Official (Governor's Authorized Representative)			Signature				
		OR FEMA USE					
RECOMMENDATION: DISAPPROVAL DISAPPROVAL							
Name and Title of Approval Official (Regional Director)			Signature		Date	Date	
Principal cancellation in the amount of \$	_	Plus I	Related Interest	is Hereby	•		
	APPROVE	D	DISAPPRO	VED			
Name and Title of Approval Official			Signature		Date		