DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency

| | | O.M.B. NO. 1660-0017 | | | |
|------|----|-----------------------|--|--|--|
| PAGE | OF | Expires July 31, 2016 | | | |

RENTED EQUIPMENT SUMMARY RECORD

| | - LQOII IIILITI | | | <u> </u> | | | | |
|---|---|---|---|---|---|---|------------------------|--------------|
| ublic reporting burden for this data collection is anintaining the data needed, and completing and garding the accuracy of the burden estimate ar 00 C Street, SW, Washington, DC 20472-3100, | d submitting this form. nd any suggestions for | .5 hours per re You are not re reducing the b | quired to respond ourden to: Information | den estimates in d to this collection ation Collections | cludes time for reviewing instruct on of information unless a valid Ol s Management, Department of Ho | MB control number is dis meland Security, Federa | played on this form. S | end comments |
| PPLICANT | | | PA ID#. | | PROJECT #. | DISASTER | | |
| OCATION/SITE | | | | | CATEGORY | PERIOD COVERING | | |
| DESCRIPTION OF WORK PERFORMED | | | | | | | | |
| TYPE OF EQUIPMENT | DATES AND | RATE PER HOUR | | TOTAL | VENDOR | INVOICE NO | DATE AND | CHECK NO |
| Indicate size, Capacity, Horsepower Make and Model as Appropriate | HOURS USED | W/OPR | W/OUT OPR | COST | VENDOR | INVOICE NO. | AMOUNT PAID | CHECK NO. |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | - | | |
| | | | | | | | | |
| | | | | | | | | _ |
| | | GRAN | ID TOTAL - | | | | | |
| I CERTIFY THAT THE ABOVE | E INFORMATION WA | S OBTAINED | FROM PAYROL | L RECORDS, IN | IVOICES, OR OTHER DOCUME | NTS THAT ARE AVAIL | ABLE FOR AUDIT. | |
| CERTIFIED | | | TITLE | | | | DATE | |