

{FEMA_LTR_HEAD}

Disaster No: {DSTR_NR}
FEMA Application No: {RGSN_ID}

{APPL_NM}
{STRT_ADR}
{CITY_STATE}

{SALUTATION}:

This letter is in response to your recent request for disaster assistance from the Federal Emergency Management Agency (FEMA). The application period for this disaster was {APPL_FROM_DATE} to {APPL_TO_DATE}; you contacted FEMA on {DATE_APPLIED}. Your application cannot be considered unless one of the following conditions prevented you from registering during the application period:

- Hospitalization, illness, disability of you or an immediate family member;
- Death of an immediate family member;
- Personal or business travel that kept you out of the area for the full application period

In order for FEMA to consider your application, you must send a letter of explanation and submit documents that clearly confirms why you were unable to apply during the application period. Your letter must be postmarked within **60 days** of this letter in order for FEMA to review your application.

Mail to:	OR	Fax to:
FEMA		800-827-8112
P.O. Box 10055		Attn: FEMA
Hyattsville, MD 20782-8055		

Please write the disaster number and your FEMA application number on all submitted documents. These numbers are printed above your name and address of this letter. Please keep all original documents for your records.

If you have further questions or would like information about other assistance programs, call FEMA's Helpline at 800-621-FEMA (3362), or visit **www.DisasterAssistance.gov**. If you are deaf, hard of hearing, or have a speech disability and use a TTY, please call 800-462-7585. If you use 711 or Video Relay Service (VRS), call 800-621-3362.

Sincerely,

{HS_OFFICER_TTL}

{LTR_CD}