Application form to add a new listing

Use this form to report your property's compliance with the Hotel and Motel Fire Safety Act of 1990 (P.L. 101-391). There is no charge for this listing. This form is being submitted to add a previously unlisted property to the National Master List.

Privacy notice Paperwork burden disclosure notice

FEMA Form 516-0-1 | OMB No. 1660-0068 | Expiration date: February 28, 2022

Status: Initial application

Property information				
Property type		1.2		
General manager	59		0.0	
				-
Property name				-1
		W.		
Employer Identification Number				
	4			
Street address				
P.O. Box optional		80		if _
		9		
City/State: (not required)			68	
ZIP code				

Property office phone number
Reservations phone number
Property fax: optional
The Vi W
Property email
Website optional
Please start with http://
Smoke alarms/automatic sprinkler systems
Smoke alarm equipped
Each guest room is equipped with at least one hard-wired single station smoke alarm installed in accordance with National Fire Protection Association (NFPA) Standard 72. Note: smoke alarms that are solely battery operated do not qualify.
Yes O No O
Automatic sprinkler equipped
Number of floors
Sprinklers required unless three stories or fewer in height
O If sprinklers installed on or after Oct. 25, 1992 This property has an automatic sprinkler system installed in accordance with NPFA Standard 13 or 13R, whichever is appropriate, in accordance with the requirements of the Act.
O If sprinklers installed before Oct. 25, 1992 This property has an automatic sprinkler system installed in compliance with an applicable standard (adopted by the governmental authority having jurisdiction, and in effect, at the time of installation), provided such standard required the placement of a sprinkler head in the sleeping area of each guest room.

O This property is three or fewer stories in height and is therefore exempt from the Act's automatic fir
sprinkler requirements.

Declaration

By submitting this form, you attest that the information supplied on this form is true and accurate to the best of your knowledge and belief. Therefore, this property is entitled to be included in the National Master List of public accommodations compiled by the U.S. Fire Administration. This information is subject to verification by federal, state, and local fire authorities, and you are subject to fines of up to \$10,000 and/or imprisonment for up to five years if you knowingly make false or fraudulent statements to the government.

Name				
Title	79			***
Organization			-	····
Your phone number				
	ii-ii			74 78
Extension optional		W		<u> </u>
Fax number optional				
		20		
For verification purposes, please the person listed in the Name fie message will be sent to this addrewithin seven days, the application	eld <mark>above.</mark> If this is a ess upon receipt of t	new property	listing, a con	firmation email
Your email address				
W W				
Submit		4 2		640

For more information contact:

U.S. Fire Administration 16825 S. Seton Ave. Emmitsburg, MD 21727 301-447-1263

Privacy notice

The collection of this information is authorized by Hotel and Motel Fire Safety Act of 1974, Public Law 101-391, 15 U.S.C. § 2201 et seq.

This information is being collected for the primary purpose of establishing and maintaining a list of hotels, motels, and similar places of public accommodation meeting minimum requirements for protection of life from fire; the list is known as the National Master List (NML).

The Department of Homeland Security may share your personal information with third parties as detailed in the DHS/ALL/PIA – 006 DHS General Contact Lists Privacy Impact Assessment. The Department's full list of privacy impact assessments can be found on the Department's website at https://www.dhs.gov/privacy-impact-assessments (https://www.dhs.gov/privacy-impact-assessments) .

The disclosure of information on this form is voluntary; however, failure to provide the information requested may delay or prevent the organization from processing your information.

Paperwork burden disclosure notice FEMA Form 516-0-1

Property Owners/Managers

Public reporting burden for this data collection is estimated to average 15 minutes per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and submitting this form. This collection of information is voluntary. You are not required to respond to this collection of information unless a valid OMB 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 20472-3100, Paperwork Reduction Project (1660-0068) NOTE: Do not send your completed form to this address.

States

Public reporting burden for this data collection is estimated to average 20 minutes per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and submitting this form. This collection of information is voluntary. You are not required to respond to this collection of information unless a valid OMB 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 20472-3100, Paperwork Reduction Project (1660-0068) NOTE: Do not send your completed form to this address.