DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency RENTED EQUIPMENT SUMMARY RECORD OF _____

PAGE

O.M.B. Control Number: 1660-0017 Expires: December 31, 2019

Public reporting burden for this data collection is maintaining the data needed, and completing an regarding the accuracy of the burden estimate a 500 C Street, SW, Washington, DC 20472-3100	nd submitting this form. and any suggestions for	.5 hours per re You are not re reducing the t	quired to respond ourden to: Information	den estimates in d to this collection ation Collections	cludes time for reviewing instruc n of information unless a valid C Management, Department of He	OMB control number is dis omeland Security, Federa	played on this form. S	end comments
APPLICANT			PA ID #.		PROJECT #.	DISASTER		
LOCATION/SITE			CATEGORY	PERIOD COVERING				
DESCRIPTION OF WORK PERFORMED								
TYPE OF EQUIPMENT Indicate size, Capacity, Horsepower Make and Model as Appropriate	DATES AND HOURS USED	RATE PER HOUR		TOTAL			DATE AND	
		W/OPR	W/OUT OPR	COST	VENDOR	INVOICE NO.	AMOUNT PAID	CHECK NO.
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		GRAN	ID TOTAL -					
	E INFORMATION WA	S OBTAINED		L RECORDS, IN	IVOICES, OR OTHER DOCUME	ENTS THAT ARE AVAIL		
CERTIFIED	TITLE				DATE			