

DEPARTMENT OF HOMELAND SECURITY
 FEDERAL EMERGENCY MANAGEMENT AGENCY
RENTED EQUIPMENT SUMMARY RECORD

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*O.M.B. No. 1660-0017
 Expires December 31, 2011*

APPLICANT	PA ID NO.	PROJECT NO.	DISASTER
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LOCATION/SITE	CATEGORY	PERIOD COVERING
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DESCRIPTION OF WORK PERFORMED

TYPE OF EQUIPMENT <small>Indicate size, Capacity, Horsepower Make and Model as Appropriate</small>	DATES AND HOURS USED	RATE PER HOUR		TOTAL COST	VENDOR	INVOICE NO.	DATE AND AMOUNT PAID	CHECK NO.
		W/OPR	W/OUT OPR					

GRAND TOTAL _____	
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I CERTIFY THAT THE ABOVE INFORMATION WAS OBTAINED FROM PAYROLL RECORDS, INVOICES, OR OTHER DOCUMENTS THAT ARE AVAILABLE FOR AUDIT.

CERTIFIED	TITLE	DATE
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PAPERWORK BURDEN DISCLOSURE NOTICE

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