

U.S. DEPARTMENT OF HOMELAND SECURITY  
FEDERAL EMERGENCY MANAGEMENT AGENCY  
**PROJECT WORKSHEET**

O.M.B. No. 1660-0017  
Expires October 31, 2008

**PAPERWORK BURDEN DISCLOSURE NOTICE**

Public reporting burden for this form is estimated to average 90 minutes per response. Burden means the time, effort and financial resources expended by persons to generate, maintain, disclose, or to provide information to us. You may send comments regarding the burden estimate or any aspect of the collection, including suggestions for reducing the burden to: Information Collections Management, U.S. Department of Homeland Security, Federal Emergency Management Agency, 500 C Street, SW, Washington, DC 20472, Paperwork Reduction Project (OMB Control Number 1660-0017). You are not required to respond to this collection of information unless a valid OMB number appears in the upper right corner of this form. **NOTE: Do not send your completed questionnaire to this address.**

DISASTER FEMA-_____-DR-____	PROJECT NO.	PA ID NO.	DATE	CATEGORY
DAMAGED FACILITY			WORK COMPLETE AS OF _____:_____%	
APPLICANT		COUNTY		
LOCATION			LATITUDE	LONGITUDE

DAMAGE DESCRIPTION AND DIMENSIONS
-----------------------------------

SCOPE OF WORK
---------------

Does the Scope of Work change the pre-disaster conditions at the site? ☐ Yes ☐ No

Special Considerations issues included? ☐ Yes ☐ No Hazard Mitigation proposal included? ☐ Yes ☐ No

Is there insurance coverage on this facility? ☐ Yes ☐ No

**PROJECT COST**

ITEM	CODE	NARRATIVE	QUANTITY/UNIT	UNIT PRICE	COST

**TOTAL COST** ➡

PREPARED BY	TITLE	SIGNATURE
APPLICANT REP.	TITLE	SIGNATURE