

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
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 COST	VENDOR	INVOICE NO.	DATE AND AMOUNT PAID	CHECK NO.
		W/OPR	W/OUT OPR					

GRAND TOTAL _____

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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