DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency

REQUEST FOR PUBLIC ASSISTANCE

OMB Control Number 1660-0017 Expires December 31, 2019

Paperwork Burden Disclosure Notice

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 displayed in the upper right corner of 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.,

information is required to obtain or retain benefits. You are not required to respond to this collection of information unless a valid OMB control number is Washington, DC 20472, Paperwork Reduction Project (1660-0017) NOTE: Do not send your completed form to this address. **Privacy Act Statement** Authority: FEMA is authorized to collect the information requested pursuant to the Robert T. Stafford Disaster Relief and Emergency Assistance Act, §§ 402-403, 406-407. 417, 423, and 427, 42 U.S.C. 5170a-b, 5172-73, 5184, 5189a, 5189e; The American Recovery and Reinvestment Act of 2009, Public Law No. 111-5, § 601; and "Public Assistance Project Administration," 44 C.F.R. §§ 206.202, and 206.209. DATE SUBMITTED APPLICANT (Political subdivision or eligible applicant) Pinellas County Oct 10, 2022 COUNTY (Location of Damages. If located in multiple counties, please indicate) **Pinellas** APPLICANT PHYSICAL LOCATION STREET ADDRESS 14 S Fort Harrison, 5th floor CITY COUNTY ZIP CODE STATE Clearwater Pinellas 33756 FL MAILING ADDRESS (If different from Physical Location) STREET ADDRESS 14 S Fort Harrison, 5th floor POST OFFICE BOX CITY ZIP CODE STATE FL Clearwater 33756 Primary Contact/Applicant's Authorized Agent Alternate Contact NAME NAME Daniel Schoel Auria Oliver TITI F TITLE **Disaster Cost Recovery Coordinator Grants Administrator BUSINESS PHONE BUSINESS PHONE** 727-453-3457 727-464-3901 FAX NUMBER **FAX NUMBER** HOME PHONE (Optional) HOME PHONE (Optional) **CELL PHONE CELL PHONE** E-MAIL ADDRESS E-MAIL ADDRESS dschoel@pinellascounty.org auoliver@pinellascounty.org PAGER & PIN NUMBER PAGER & PIN NUMBER Did you participate in the Federal/State Preliminary Damage Assessment (PDA)? YES NO Private Non-Profit Organization? YES If yes, which of the facilities identified below best describe your organization? Title 44 CFR, part 206.221(e) defines an eligible private non-profit facility as: "... any private non-profit educational, utility, emergency, medical or custodial care facility, including a facility for the aged or disabled, and other facility providing essential governmental type services to the general public, and such facilities on Indian reservations." "Other essential governmental service facility means museums, zoos, community centers, libraries, homeless shelters, senior citizen centers, rehabilitation facilities, shelter workshops and facilities which provide health and safety safety services of a governmental nature. All such facilities must be open to the general public." Private Non-Profit Organizations must attach copies of their Tax Exemption Certificate and Organization Charter or By-Laws. If your organization is a school or educational facility, please attach information on accreditation or certification. OFFICIAL USE ONLY: FEMA -4673 -DR-DR FIPS# 103-99103-00 **DATE RECEIVED**