U.S. Department of Homeland Security FEDERAL EMERGENCY MANAGEMENT AGENCY Transitional Sheltering Assistance Terms and Conditions

THIS PORTION SHOULD BE FILLED OUT BY THE LODGING PROPERTY

Check in Date:	Check out Date:	FEMA DR #
Last Name: First Name:		
Last 4 Digits of SSN:	FEMA Registration ID:	Date of Birth:
I understand that:		
Assistance (TSA) hotel. I am not required to provide the FEMA will pay the nightly roof FEMA approved amount for the I am responsible for any exper limited to, restaurant, club, roof additional services or charges at TSA is only available for use by assistance. Each displaced houseach room. I am responsible for any charge facility or hotel property during	the hotel with a credit card or a cash depoint rate and taxes, as well as non-refundate time I am authorized to remain in the ase above the FEMA approved amount of service, telephone, movie rental, interesting my responsibility. The household members listed on my Feschold can get one (1) room for every for the service related to damage I or my g my stay.	able pet fees if applicable, for my hotel stay up to the
safety and the safety of others. FEMA will conduct regular re	I am not required to be present at the t views of my eligibility for TSA throug	
 I must respond to FEMA attentor access to my room. FEMA will notify me if I am n If I stay beyond my eligibility of 	o longer eligible for TSA to allow for nend date, I am responsible for all costs a	A registration and assistance, or I may lose my TSA my transition out of TSA. associated with my hotel stay from that point on. ged in actions that violate written hotel policy or the
If you have questions regarding a relay service, please provide FE	_	the FEMA Helpline at 1-800-621-3362. If you use
If you have any other disaster relanumber.	ated questions, visit <u>DisasterAssistance</u>	e.gov or call the FEMA Helpline at the above-listed
	raud Hotline at (866) 223-0814. Your ca	A or engaging in suspicious, dangerous, or criminal all is completely confidential. You also may send an
Registrant Signature at Check	In	Date

Date