

DECLINATION TO PARTICIPATE IN PUBLIC ASSISTANCE GRANT PROGRAM
FEMA DR-4021-NJ

APPLICANT NAME:

The _____ declines to participate in the Public Assistance Grant Program for the following reason (Please check one).

_____ No Eligible damages

_____ Damage is below FEMA's required minimum amount of \$1,000.00

_____ Other (please explain). _____

I understand that this action will have no impact on obtaining Federal assistance for any future disaster event.

Authorized Agent/ Mayor

Date (month, day, year)

Please fax to:

State Public Assistance Officer
Joint Field Office

Phone:

Fax:

Agent's Signature