TN Department of <b>TEMA</b>	Public Assistance Applicant Withdrawal	
Applicant:	Disaster Number:	PA ID Number:
Withdrawal		
Please withdraw our Request for Public Assistance due to: Ineligible work Reimbursable work below FEMA's required minimum Other (please explain)		
Signature		
I understand that this action will have no impact on obtaining federal assistance for future disaster events.		
Signature of Authorized Representative	Title	Date
Mail or Fax to:		
Public Assistance Program Tennessee Emergency Management Agency 3041 Sidco Drive Nashville, Tennessee 37204-1502 Fax: 615.242.4770		
For TEMA Use Only		
Date Received:	Liaison Review Date and I	nitials:
Date Forwarded to FEMA:	Date Database Updated:	
Signature of State Public Assistance Officer	Date	
Comments:		

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