FEDERAL EMERGENCY MANAGEMENT AGENCY
PAYMENT INFORMATION FORM

Community Name:

Project Identifier:

THIS FORM MUST BE MAILED, ALONG WITH THE APPROPRIATE FEE, TO THE ADDRESS BELOW OR FAXED TO THE FAX NUMBER BELOW.

Please make check or money order payable to the National Flood Insurance Program.

Type of Request:

☐ MT-1 application
☐ MT-2 application

LOMC Clearinghouse
3601 Eisenhower Ave. Suite 500
Alexandria, VA 22304-6426
 Attn.: LOMC Manager

☐ EDR application

FEMA Project Library
3601 Eisenhower Ave. Suite 500
Alexandria, VA 22304-6426
 FAX (703) 960-9125

Request No. (if known): _____   **Check No.:** _____   **Amount:** _____

☐ INITIAL FEE* ☐ FINAL FEE ☐ FEE BALANCE** ☐ MASTER CARD ☐ VISA ☐ CHECK ☐ MONEY ORDER

*Note: Check only for EDR and/or Alluvial Fan requests (as appropriate).

**Note: Check only if submitting a corrected fee for an ongoing request.

COMPLETE THIS SECTION *ONLY* IF PAYING BY CREDIT CARD

CARD NUMBER   EXP. DATE

☐☐☐☐ — ☐☐☐☐ — ☐☐☐☐ — ☐☐☐☐   ☐☐ — ☐☐

1 2 3 4   5 6 7 8   9 10 11 12   13 14 15 16   Month   Year

_____
Date

_____
Signature

NAME *(AS IT APPEARS ON CARD)*: _____
(please print or type)

ADDRESS: _____
(*for your
credit card   _____
receipt-please
print or type*)

DAYTIME PHONE: _____

FEMA Form 81-107   **Payment Information Form**