

YOUNG LAWYERS DIVISION, AMERICAN BAR ASSOCIATION
DISASTER LEGAL SERVICES INTAKE FORM
(Legal services are delivered under terms of agreement between YLD and FEMA)

DATE:	DISASTER NUMBER: FEMA-1603-DR (LA)
NAME OF APPLICANT:	COUNTY OF RESIDENCE AT TIME OF DISASTER:
CURRENT TEL. NO.:	BEST TIME TO CALL:
CURRENT ADDRESS: <i>(Street, City, Zip)</i>	PRE-DISASTER ADDRESS (if different): <i>(Street, City, Country, Zip)</i>

LEGAL PROBLEMS (use reverse if needed)

MISCELLANEOUS

1. Has the caller registered for FEMA services? (not required but encouraged) Yes No
2. Does the caller otherwise have access to legal services? Yes No
3. Is the request related to the disaster? Yes No
4. Does the request involve a fee-generating case? Yes No
5. Will this call be referred to a volunteer lawyer? Yes No
6. Area(s) of law for referral _____

INTAKE VOLUNTEER NAME: (Print)	INTAKE VOLUNTEER SIGNATURE:
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