

**INDIVIDUALS AND HOUSEHOLDS PROGRAM (IHP)
OTHER NEEDS ASSISTANCE ADMINISTRATIVE OPTION SELECTION**

Instructions: This Other Needs Assistance (ONA) Administrative Option Selection Form must be completed and submitted to the Federal Emergency Management Agency (FEMA) by November 30 of each year. This form may be changed during any non-disaster time period or within three days following a major disaster or emergency declaration.

PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for this data collection is estimated to average 1.08 hour per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and submitting this form. This collection of information is required to obtain or retain benefits. You are not required to respond to this collection of information unless a valid OMB control number is displayed on this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing the burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 500 C Street, SW, Washington, DC 20472-3100, Paperwork Reduction Project (1660-0061). **NOTE: Do not send your completed form to this address.**

PRIVACY ACT STATEMENT

AUTHORITY: FEMA is authorized to collect the information requested on this form pursuant to Section 696 of the Post-Katrina Emergency Management Reform Act of 2006 (PKEMRA), 6 U.S.C. 795; The Robert T. Stafford Disaster Relief and Emergency Assistance Act as amended, 42 U.S.C. §§ 5121-5207 and Reorganization Plan No. 3 of 1978 (43 FR 41943); 44 C.F.R. § 206.2(a) (27); The Homeland Security Act of 2002, 6 U.S.C. §§ 311-321j; The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (Pub. L. 104-193) and Executive Order 12862, Setting Customer Service Standards, dated September 11, 2003 and Executive Order 13411, Improving Assistance for Disaster Victims, dated August 29, 2006. DHS asks for your SSN pursuant to the Debt Collection Improvement Act of 1996, 31 U.S.C. § 3325(d) and § 7701(c)(1). SSNs are included on tax returns pursuant to Internal Revenue Code (various amendments), 26 U.S.C. 6109(d).

PRINCIPAL PURPOSE(S): FEMA collects this information from State/Territorial/Tribal Nation Government to indicate their option selection every year to administer financial Other Needs Assistance under a Presidentially-declared disaster and identify the limits for specific items. FEMA will utilize this information internally for quality assurance control purposes.

ROUTINE USE(S): FEMA may share the information collected on this form externally as permitted under 5 U.S.C. § 552a(b) of the Privacy Act of 1974, as amended. This includes sharing this information with State/Territorial/Tribal Nation Government, and voluntary organizations to enable individuals to receive additional disaster assistance and as necessary and authorized by other routine uses published in DHS/FEMA-008 Disaster Recovery Assistance Files System of Records, 87 Fed. Reg. 7852 (Feb. 10, 2022), and upon written request, by agreement, or as required by law.

DISCLOSURE: The disclosure of information on this form is voluntary; however, failure to provide the information requested may delay or prevent the individual from receiving disaster assistance. If you have any questions about completing this document, you should call FEMA's Helpline at 1-800-621-FEMA (3362) (hearing/speech impaired only: 1-800-462-7585) as soon as possible.

SUMMARY OF THE ADMINISTRATIVE OPTIONS

FEMA OPTION: Under this option, FEMA administers Other Needs Assistance. The State/Territorial/Tribal Nation Government coordinates ONA activities with FEMA. FEMA is responsible for functional elements 1 through 10.

JOINT OPTION: Under this option, the State/Territorial/Tribal Nation Government administers Other Needs Assistance. FEMA participates in providing Other Needs Assistance with the State/Territorial/Tribal Nation Government. FEMA is responsible for functional elements 1, 2, 3, & 8. The State/Territorial/Tribal Nation Government is responsible for functional elements 4, 5, 6, 7, 9, & 10.

STATE/TERRITORIAL/TRIBAL NATION GOVERNMENT OPTION: Under this option, the State/Territorial/Tribal Nation Government administers Other Needs Assistance. The State/Territorial/Tribal Nation Government reports Other Needs Assistance activities to FEMA. The State/Territorial/Tribal Nation Government is responsible for functional elements 1 through 10.

DESCRIPTION OF STANDARD PROCESSES

This section explains the 10 standard processes necessary to successfully implement the Other Needs Assistance provision.

- 1) Registration Intake:** the process for receiving applications (Application/Registration for Disaster Assistance FEMA Form 009-0-1) from disaster survivors who are in need of Federal disaster assistance. The process must be able to receive late applications, up to the timeframe as described in 44 CFR 206.112.
- 2) Inspection Services:** the process for inspecting, verifying, and recording individually reported disaster-related damages, which will be used to determine the level of Federal disaster assistance.
- 3) Processing System:** a system designed for making uniformed eligibility determinations, to include methods for determining cost for personal property and tracking eligibility decisions.
- 4) Disbursing Awards:** a process for issuing funds to applicants.
- 5) Staffing and Helpline:** a process that ensures adequate space and an appropriate number of trained personnel. It also includes appropriate equipment necessary to process assistance (i.e., computers, phones, and facsimile machines).
- 6) Recovery of Funds:** a process for collecting erroneously awarded funds.
- 7) Case Processing:** a system to process applications and respond to applicant inquiries.
- 8) Mail Processing:** a process for sending program decisions and requests for information and receiving incoming correspondence.
- 9) Appeal Processing:** an official protocol for evaluating an applicant request to have a program decision reviewed.
- 10) Preparing Closeout:** a process that involves the preparation of the narrative and statistical documents that comprise a model closeout package. The duties of this process include ensuring that there are no cases pending and that all funds are reconciled for grants and reimbursement of State/Territorial/Tribal Nation government expenses.

Auto-Determination allows the FEMA Processing System business rules to routinely process information received from registrations and inspections and make an eligibility determination without manual intervention.

STATE/TERRITORIAL/TRIBAL NATION GOVERNMENT SELECTION AND LINE ITEM MAXIMUM

The State/Territorial/Tribal Nation Government of South Carolina selects the following administrative option for the administration of the Other Needs Assistance provision of the Individuals and Households Program:

- ☒ **FEMA Option:** FEMA Administers & Processes.
- ☐ **JOINT Option:** State/Territorial/Tribal Nation Government Administers & FEMA Participates:
- ☐ FEMA Processing System Auto-determination **ON**
- ☐ FEMA Processing System Auto-determination **OFF**
- ☐ **STATE/TERRITORIAL/TRIBAL NATION GOVERNMENT Option:** State/Territorial/Tribal Nation Government Administers & Processes. The State/Territorial/Tribal Nation Government approves the following award values and maximum amounts for specific types of ONA:

The State/Territorial/Tribal Nation Government approves the following line item amounts to be awarded for ONA:

Transportation Repair:	\$	615.00			
Transportation Replace (Total loss)	\$	8,595.00			
Funeral Assistance (Maximum):	\$	9,347.00	☐ Per household	☒ Per death	
Child Care Assistance (Maximum):	\$	2,700.00	☐ Per household	☒ Per child	

Displacement Assistance: 14 days @ rate of \$ 114.00 per day

*Rate applies to all declared areas and is based on:

- ☒ General Services Administration (GSA) standard lodging rate
- ☐ Lodging rate established by the State/Territorial/Tribal Nation Government
- ☐ Rate established by the GSA or State/Territorial/Tribal Nation Government for a specific locality in the declared area (city, town, etc): _____

- ☒ **The State/Territorial/Tribal Nation Government approves the additional Personal Property and/or Miscellaneous items.**
Attached is the list of additional items, the justification, and situations for use.

This administrative option is agreed upon by:

State/Territorial/Tribal Nation Government Authorizing Signature

FEMA Authorizing Signature

Kim Stenson Digitally signed by Kim Stenson
Date: 2025.09.16 16:18:30 -04'00'

09/16/2025

Governor/Tribal Chief Executive or Designee

Date

Regional Administrator or Designee

Date

ADDITIONAL ONA ITEMS

If the State/Territorial/Tribal Nation Government is requesting additional Personal Property and/or Miscellaneous items, list the items below and provide the justification and situations for use.

Line Item: Infant feeding supplies/materials; \$60.00 each ONA Category: Personal Property

Standard Quantity: 1:1 Maximum Quantity Awarded: 1:1

Justification/Situations for Use:

For families with infants who experienced a disaster-related loss that disrupted or damaged infant feeding materials.

FEMA USE ONLY ☒ Approved Initial SOT ☐ Not Approved Initial _____

Line Item: Internet router/modem; \$155.00 Each ONA Category: Personal Property

Standard Quantity: 1.00 Maximum Quantity Awarded: 1.00

Justification/Situations for Use:

For families/households who experienced disaster-related loss that resulted in loss or destruction of existing internet modem and/or router not the responsibility of the carrier/service provider (will not be replaced by service provider). (Allowance estimate based on price at major retailer).

FEMA USE ONLY ☒ Approved Initial SOT ☐ Not Approved Initial _____

Line Item: _____ ONA Category: _____

Standard Quantity: _____ Maximum Quantity Awarded: _____

Justification/Situations for Use:

FEMA USE ONLY ☐ Approved Initial _____ ☐ Not Approved Initial _____

Line Item: _____ ONA Category: _____

Standard Quantity: _____ Maximum Quantity Awarded: _____

Justification/Situations for Use:

FEMA USE ONLY ☐ Approved Initial _____ ☐ Not Approved Initial _____

Federal Emergency Management Agency

Standard Personal Property Line Items

Calendar Year [Jan 1 - Dec 31], 2026

Line Item Description	Quantity
Living Room	
Coffee table	1
Lamp (1 floor – 1 table)	2
Upholstered 8' sofa	1
Upholstered chair	1
Bedroom	
18" x 48" Mirror	1
4 Drawer chest	1
4' x 5' Mini-blind set	1
Bed – frame/found/mattress	1
Bedspread	1
Blanket	1
Lamp	1
Nightstand	1
Sheet set	1
Standard pillow	1
Bathroom	
3' x 4' Mini-blind set	1
Panel shower curtain	1
Set of personal brushes/combs/ etc. - \$50 Hygiene Allowance	1
Set of personal hygiene items - \$50 Hygiene Allowance	1
Shower rod	1
Towels - (1) 4-piece towel set	4
Tub mat	1
Trash can	1
Dining Room	
Dining table and chairs (4 persons)	1

Line Item Description	Quantity
Kitchen	
2' x 4' Area rug	1
3' x 4' Mini-blind set	1
Blender	1
Broom	1
Can opener (electric)	1
Coffee maker	1
Cooking utensils (miscellaneous)	1
Dinnerware (service for 8)	1
Dish rack and drainer	1
Dishtowels and pot holders (4 pieces)	1
Fire extinguisher (9 lb)	1
Flatware (service for 8)	1
Fork (meat)	1
Glassware (service for 8)	1
Knife set (7 pieces)	1
Mixer (handheld)	1
Mixing bowl set (4 pieces)	1
Mop and bucket	1
Pots and pans w/lids set (8 pieces)	1
Spatula	1
Spoon (cooking)	1
Toaster (2 slots)	1
Trash can	1
Whisk	1
Essential Tool Line Items	
Computer (Essential)	1
Occupational Tools	1
School Books/Supplies	1
Uniforms	1

STATE/INDIAN TRIBAL GOVERNMENT
ACKNOWLEDGEMENT



Governor/Tribal Chief Executive or Designee

 11/25

Date

Federal Emergency Management Agency

Standard Personal Property Line Items

Calendar Year (Jan 1 – Dec 31), _____

Line Item Description	Quantity
Personal Property Line items [Previously Owned]	
Air Conditioner **	1:1 ratio
Appliance Service Call	1
* Carbon Monoxide Detector - Misc/Other line item also	1
* Chainsaw - Misc/Other line item also	1
Child Car Seat **	1:1 ratio
Clothing **	1:1 ratio
* Dehumidifier - Misc/Other line item also	1
Dryer	1
Electric Fan **	1:1 ratio
Freezer	1
* Generator - Misc/Other line item also	1
High Chair **	1:1 ratio
* Humidifier - Misc/Other line item also	1
Infant crib**	1:1 ratio
Infant stroller **	1:1 ratio
Microwave	1
Playpen	1
Radio	1
Range/Oven	1
Refrigerator	1
Space Heater **	1:1 ratio
Telephone	1
Television	1
Toys **	1:1 ratio
Twin Bed **	1:1 ratio
Vacuum	1
Washer	1
* Weather Radio - Misc/Other line item also	1

Line Item Description	Quantity
Personal Property Heat Source Line items [Previously Owned]	
Coal (ton)	Up to 1 ton
Wood (cord)	Up to 1 cord
Kerosene (gallon)	Up to 200 gallons
Oil (gallon)	Up to 200 gallons
Pellets (ton)	Up to 1 ton
Propane (gallon)	Up to 200 gallons
Miscellaneous/Other Line items	
* Carbon Monoxide Detector	1
* Chainsaw	1
* Dehumidifier	1
* Generator	1
* Humidifier	1
Smoke Detector - one per damaged floor	1
* Weather Radio	1
Americans with Disabilities Act Line Items [Previously Owned]	
ADA Accessible Bed	1
ADA Accessible Computer	1
ADA Accessible Raised Toilet Seat	1
ADA Accessible Refrigerator	1
ADA Accessible Washer	1
ADA Flashing Fire Alarm - one per damaged floor and occupied bedroom	1
ADA Shower Chair	1
ADA TTY/TDY Telephone	1
ADA Walker	1
ADA Wheel Chair	1

STATE/INDIAN TRIBAL GOVERNMENT
ACKNOWLEDGEMENT



Governor/Tribal Chief Executive or Designee

14 SEP 25

Date

* These items can either be previously owned or purchased post-disaster. Assistance will only be awarded under one category and disaster household members who need or are required to use the item or 1 item per occupied bedroom; a 1:1 ratio.