ELA.CORPLODGING.COM

Online Account User Guide

TABLE OF CONTENTS

PROGRAM ENROLLMENT

BEFORE ENROLLING, PLEASE CALL 1-866-545-9865 TO VERIFY IF YOUR PROPERTY ALREADY HAS AN EMERGENCY LODGING ASSISTANCE ACCOUNT.

Login

UserName

Password

SUBMIT >>

HOTEL ENROLLMENT
▼ ▼ ▼ ▼ ▼

If you need an ELA Hotel

Account Please Click Here

I forgot my password

- All hotels/lodging providers wishing to participate in the Emergency Lodging Assistance (ELA) Program must first complete CLC Lodging's (CLC) online enrollment process at the Program website **ela.corplodging.com (NOTE: no www)**

PROGRAM ENROLLMENT (CONTINUED)

If you do not have a current Corporate Lodging user account, please click the 'ENROLL' button to continue on and create a new account.

ENROLL >>

If you have a current Corporate Lodging user account, please login below and we will look up your information to help with your ELA account creation.

Username

Password

LOGIN >>

Hotel ELA Enrollment   ? HELP

Please complete ONE of the pairings below to identify your property:

If you do not have any of the below information: Skip This >>

1)	CLC #	
	CLC Check #	
OR		
2)	Hotel Chain	Please Select... ▼
	Chain Property #	
OR		
3)	Sabre or Worldspan #	
	Zip Code	

SUBMIT >>

- Click **Enroll** to begin the ELA account enrollment process
- Properties with existing CLC WebCheckINN accounts may enter their respective WebCheckINN usernames and passwords and then click **Login** to pre-populate associated lodging provider information on the next page

- Hotels/lodging providers can identify their property via one of three convenient options:
- CLC number & CLC Check number
- Lodging provider Chain & Chain Property number
- Sabre or Worldspan number & Zip Code
- Enter the applicable information in the fields provided
- Click **Submit**

- If you are unable to provide any of the above information, click **Skip This** to manually create your lodging provider account

4

PROGRAM ENROLLMENT (CONTINUED)

- The **Lodging Provider Account Creation** screen allows prospective ELA program partners to create an ELA account by supplying complete contact information

- Enter your property's contact information in the fields provided

- Create a **Username** for your ELA account
(NOTE: choose a username that is property-related and easy for you to remember)

- Enter your **first** and **last** name in the fields provided

- Enter your **email** in the fields provided
    NOTE: accurate email information is essential. CLC delivers your new account password to the email address provided

- Click **Submit**

PROGRAM ENROLLMENT (CONTINUED)

- The **Lodging Provider Conformation** screen allows properties to review their provided contact information

- Review the information displayed in the **Lodging Provider Confirmation** section

- Click **Edit** to revise any of the displayed lodging provider contact information

- Click **Submit** to confirm the displayed lodging provider contact information

PROGRAM ENROLLMENT (CONTINUED)

- The **Lodging Provider Amenities** screen allows lodging partners to identify various facilities and services available at their property

- In the required fields provided, identify the amenities available at your property

NOTE: please provide as accurate information as possible to assist individuals seeking lodging

PROGRAM ENROLLMENT (CONTINUED)

The following information is optional, but we encourage you to complete the form. You can return and edit this information at a later time.

Hotel Internet Address:

(Ex: http://www.yoursite.com)

Does hotel comply with the Americans with Disabilities Act of 1990?
○ Yes ○ No ● NA

Year of last complete guest room renovation:

(example: 1999)

Total number of non smoking rooms (including suites):

Self-service laundry on-site:
○ Yes ● No

Management Company:

Ownership Company:

Is your property certified by the National Minority Supplier Development Council?
○ Yes ○ No ● NA

Is your property certified by Small Business Administration or Women's Business Enterprise National Council?
○ Yes ○ No ● NA

Lodging tax:
(If not applicable, enter 0)
(Do not enter a decimal for % entries)

Lodging tax: Percent or fixed amount?
● Percent ○ Fixed

State tax:
(If not applicable, enter 0)
(Do not enter a decimal for % entries)

State tax: Percent or fixed amount?
● Percent ○ Fixed

City tax:
(If not applicable, enter 0)
(Do not enter a decimal for % entries)

City tax: Percent or fixed amount?
● Percent ○ Fixed

Occupancy tax:
(If not applicable, enter 0)
(Do not enter a decimal for % entries)

Occupancy tax: Percent or fixed amount?
● Percent ○ Fixed

Free Continental breakfast:
○ Yes ● No

Restaurant on site:
○ Yes ● No

SUBMIT >>

- In the optional fields provided in the **Lodging Provider Amenities** screen, identify additional amenities available at your property
- Click **Submit**

PROGRAM ENROLLMENT (CONTINUED)

HOME | PROGRAM INFORMATION | FAQ | CONTACT US

Your account has been created.

You will receive an email shortly. You will be able to access your account immediately with the information provided in the email we have sent you.

Go to the ELA Homepage

- Upon successful enrollment, your ELA account will be activated
- CLC emails your ELA account password to the email address provided during the enrollment process
- Use your username and supplied password to access your ELA account

- It is important to immediately sign into the newly requested ELA account to review the **Emergency Lodging Assistance Payment Contract**
- The system prompts you to initial and agree to the contractual terms provided
- Print a copy of the payment contract for your records prior to initialing and agreeing to the terms electronically

ONLINE ELA ACCOUNT SIGN-IN

- Participating lodging partners are required to enter their **Username and Password** to access the **Emergency Lodging Assistance** online billing system

- Enter your **Username** and **Password** in the fields provided

- Click the **SUBMIT** button

- The **Username and Password** is established by each property. If the **Password** is lost, click on the applicable **I forgot my password** retrieval link

MyELA PAGE

- From the *My*ELA page, lodging partners are able to change ELA account passwords

- ELA program partners **Update Room Availability** to remove or publish their properties to the Program lodging directory (www.femaevachotels.com)
- Click on the green/red oval to **Make Rooms Unavailable** or to **Make Rooms Available** (pertaining to additional rooms available and not FEMA survivors already in house)

- Updates regarding FEMA survivors' qualification periods, including extensions or terminations of assistance, are reviewed in the **Survivor Alerts** section of the *My*ELA page

- Program updates can be viewed in the **ELA Program News** section

- You can view and edit contact info on the *My*ELA page
- To make any changes, click the **Edit This Information** link in the **Lodging provider Information** field

PROPERTY INFORMATION UPDATES

- You can view and edit contact info on the *MyELA* page
- To make any changes, click the **Edit This Information** link in the **Lodging Provider Information** field

LODGING PROVIDER QUALIFICATION & CHECK-IN

GETTING STARTED
Check in a guest using this form.

Check Guest Qualification (?)

Date of Checkin (REQUIRED)

(format: MM/DD/YYYY)

*You must fill in at least 3 fields below

Registration ID

First Name

Last Name

Last 4 digits of SSN #

Date of Birth

(format: MM/DD/YYYY)

SUBMIT >>

CLC provides ELA Program partners with instant survivor verification, authorized dates of stay and number of rooms allocated when the **Check Survivor Qualification** online form is completed

- Enter or select the survivor's **Date of Checkin** in the field provided, followed by 3 of the following fields:
- Survivor's Registration ID number
- Survivor's First Name
- Survivor's Last Name
- Survivor's Last 4 digits of Social Security number (SSN#)
- Survivor's Date of Birth

(**NOTE: survivor registration information must match FEMA's records exactly when submitted or the survivor may not be found in the database. For assistance or to confirm survivor qualification, please contact the ELA Lodging Support Center at 1-866-545-9865**)

- Click **SUBMIT**

LODGING PROVIDER QUALIFICATION & CHECK-IN

- All qualified survivors requesting lodging must present a valid, government-issued photo ID (for example, a current state issued driver's license) at check-in
- Obtain a signed-and-completed **ELA Terms and Conditions Form** from the survivor. The form is printed by the property and is found by clicking on the **Program Information** menu **(NOTE: updates regarding FEMA survivors' qualification periods are reviewed in the Survivor Alerts section of the *My*ELA page)**
- Check the following boxes as appropriate:
- "I have verified identification for this survivor…"
- "I have collected a signed and completed (by the survivor)…"
- "I agree to comply…"
- Click **Check In** to proceed with the survivor's check in process

If the survivor is unable to present a valid, government-issued photo ID, click **Cancel** to end the check-in session

Guest Room Assignment   ? HELP
Guest: GEORGE WASHINGTON

The following rooms are approved for this guest:
(You can only check in one room at a time)

Available Rooms	Room Qualification Dates	Options
1	06/14/2022 - 12/31/2022	Check In

Scroll down to submit this information.
Folio Number*

Room Number*

Check In Date *

(format: MM/DD/YYYY)
Any Special Needs Requirements (Optional)
- ☐ Elderly
- ☐ Health
- ☐ Disabled
- ☐ Other [   ] Please Specify

Does this room have a kitchenette?*
A hotel/motel will be considered as having adequate "kitchen facilities" when it has all of the following present: 1) Kitchen Sink; 2) Burners or Cook Stove (hot-plates are not considered cook stoves); and 3) Standard Size Refrigerator.
○ Yes ● No

Daily Room Rate (Including Occupancy Tax)*
$ 0   (No $ Signs)
State Tax Amount
$ 0   (No $ Signs)
County Tax Amount
$ 0   (No $ Signs)
City Tax Amount
$ 0   (No $ Signs)
Occupancy Tax Amount
$ 0   (No $ Signs)
Convention/Tourism Tax Amount
$ 0   (No $ Signs)
Misc 1 Tax Amount
$ 0   [Misc 1 Description]   (No $ Signs)
Misc 2 Tax Amount
$ 0   [Misc 2 Description]   (No $ Signs)
Daily Tax Amount
$ 0
Pet Fees
$ 0   (No $ Signs)
Total Daily Rate:
0.00

SUBMIT >>

•After survivor qualification, complete the check in process via the **Survivor Room Assignment** screen

The **Survivor Room Assignment** screen displays the survivor's authorization information (including ELA eligibility period and rooms available)

•Click **Check In** to assign the survivor a room
•Enter the requested room information in the fields provided

Lodging providers may enter UP TO the regular RACK room rate and taxes for the assigned room.

- Lodging Providers can allocate their daily room rate and various taxes
- See next page for a breakdown of how for an example using the allocations for daily rate and taxes.

•**CLC's ELA website immediately alerts lodging providers of daily room charges that exceed the program's overage threshold as determined by FEMA for the specific disaster**

Guest Room Assignment   ? HELP

Guest: GEORGE WASHINGTON

The following rooms are approved for this guest:
(You can only check in one room at a time)

Available Rooms	Room Qualification Dates	Options
1	06/14/2022 - 12/31/2022	Check In

Scroll down to submit this information.

Folio Number*
8675309

Room Number*
123

Check In Date *
06/14/2022
(format: MM/DD/YYYY)

Any Special Needs Requirements (Optional)
☐ Elderly
☐ Health
☐ Disabled
☐ Other _____ Please Specify

Does this room have a kitchenette?*
A hotel/motel will be considered as having adequate "kitchen facilities" when it has all of the following present: 1) Kitchen Sink; 2) Burners or Cook Stove (hot-plates are not considered cook stoves); and 3) Standard Size Refrigerator.
○ Yes ● No

Daily Room Rate (Including Occupancy Tax)*
$ 90 (No $ Signs)

State Tax Amount
$ 5.55 (No $ Signs)

County Tax Amount
$ 4.44 (No $ Signs)

City Tax Amount
$ 3.33 (No $ Signs)

Occupancy Tax Amount
$ 2.22 (No $ Signs)

Convention/Tourism Tax Amount
$ 0 (No $ Signs)

Misc 1 Tax Amount
$ 1.11 | Arena Tax (No $ Signs)

Misc 2 Tax Amount
$ 0 | Misc 2 Description (No $ Signs)

Daily Tax Amount
$ 16.65

Pet Fees
$ 10 (No $ Signs)

Total Daily Rate:
$116.65

SUBMIT >>

- Here is an Example with the check in rate fields filled out.

- This property is checking in the survivor for **Room** *123* using a **Daily Rate** of *$90* Before tax.
  - *$5.55* for **State tax**
  - *$4.44* for **County tax**
  - *$3.33* for **City tax**
  - *$2.22* for **Occupancy tax**
  - *$0.00* for **Convention/Tourism Tax**
  - *$1.11* for **Misc tax** labeled as **Arena Tax**

  Automatically calculated the Total Daily Taxes as *$16.65*
- Add a **Nightly Pet Fee** (If applicable).

- Automatically added nightly rate, taxes and pet fees to give the **Total Requested Daily Rate**.

- When finished click **Submit**.

Guest Room Assignment   **?** HELP

Guest: GEORGE WASHINGTON

The following rooms are approved for this guest:
(You can only check in one room at a time)

Available Rooms	Room Qualification Dates	Options
1	06/14/2022 - 12/31/2022	**Check In**

The room charges (Daily Room Rate + Daily Tax Amount) entered exceed the maximum allowed under this program by $10.65.

Please adjust your daily rate(s) on the form below and click Submit.

Guest Room Assignment   **?** HELP

Guest: GEORGE WASHINGTON

The following rooms are approved for this guest:
(You can only check in one room at a time)

Available Rooms	Room Qualification Dates	Options
1	06/14/2022 - 12/31/2022	**Check In**

You have selected a check in date that is earlier than the current date. By clicking "I AGREE" below you certify that the check in date of 06/14/2022 was the actual date this guest checked in to your property and was not entered in error.

I AGREE   **Cancel >>**

CLC's ELA website immediately alerts lodging providers of daily room charges that exceed the program's overage threshold as determined by FEMA for the specific disaster

- Here is an example where the total requested daily rate was **Over** FEMA's cap amount for the program.

Qualified survivors are responsible for paying any amount exceeding the program's overage threshold (**NOTE: Lodging providers are responsible for collecting any overage amount from the survivor**)

- If this happens, the lodging provider **MUST** re-enter the adjusted survivor room assignment information to continue.

- Once the adjustment is accepted a confirmation pop-up will need to be accepted, by clicking **I agree.**

CLC LODGING

FEMA Emergency Lodging Assistance

HOME | PROGRAM INFORMATION | USER GUIDE | USER GUIDE (EN ESPAÑOL) | FAQ | CONTACT US | LOGOUT

MyELA | Submit Billing | Billing History | Guest Summary

Guests Summary ? HELP

Billing History Search

Guest Last Name	
Date of Stay	
Room #	
Folio #	

Search >>

Your full guest history is available for download: DOWNLOAD FILE

Guest Name	Qualification Period	Room #	Folio #	Daily Room Rate	Status	
GEORGE WASHINGTON	06/14/2022 - 12/31/2022	123	8675309	$95.65	CHECKED IN (06/14/2022)	DETAILS

- Click on the tab **Guest Summary** to view the survivors that are currently staying /or stayed at the property.
- View a brief overview of the survivors stay, including the *survivors name, qualification period, room number, folio number, daily room rate and status* of the stay.

- Click **Details** next to the survivors information for more details or to edit the information.

*Please note the Daily Room Rate listed here is the **Daily Room rate without Taxes**.

Guest Room Assignment   ?HELP

Guest: GEORGE WASHINGTON

There are no additional rooms approved for this guest to be checked into.

Room 123 Edit This Check In

Status: CHECKED IN   Date In: 06/14/2022

Folio Number: 8675309   Date Out: ---

Billed From: ---   Billed Through: ---

Allowed Daily Room Rate: $80.00   Allowed Daily Tax Amount: $15.65

                                       Allowed Daily Pet Fee: $0.00

*This is the amount FEMA will pay   Allowed Total Daily Rate: $95.65 *

                    Cancel Check In

                    Check Out

- View more details about the survivors stay.
- If there is any information that was entered incorrectly click **Edit this Check in.**
- Edit the fields needed and when finished click **Submit.**

Edit Room

Guest:
GEORGE WASHINGTON

Folio Number*
8675309

Room Number*
123

Check In Date *
06/14/2022   (format: MM/DD/YYYY)

Any Special Needs Requirements (Optional)
☐ Elderly
☐ Health
☐ Disabled
☐ Other [   ] Please Specify

Daily Room Rate (Including Occupancy Tax)*
$ 80.00   (No $ Signs)

State Tax Amount
$ 5.55   (No $ Signs)

County Tax Amount
$ 4.44   (No $ Signs)

City Tax Amount
$ 3.33   (No $ Signs)

Occupancy Tax Amount
$ 1.22   (No $ Signs)

Convention/Tourism Tax Amount
$ 0.00   (No $ Signs)

Misc 1 Tax Amount
$ 1.11   Arena Tax   (No $ Signs)

Misc 2 Tax Amount
$ 0.00   Misc 2 Description   (No $ Signs)

Total Applicable Daily Tax Amount
$ 15.65

Pet Fees
$ 0.00   (No $ Signs)

Total Daily Rate:
$95.65

SUBMIT >>

SUBMIT BILLING

Guests Available for Billing   ? HELP

Guest Name	Folio #	Room #	Check-in Date	Qualified Through	Billed Thru	Options
ELA611 TEST611	100	1408	07/30/2007	01/31/2008	--	BILL >>

Bill Stay for ELA611 TEST611   ? HELP

Guest

ELA611 TEST611

Folio Number

100

Room Number

1408

Billing From Night Of:

07/31/2007

Billing Through Night Of:

07/31/2007 ▾

○ Check this guest out? (The check out date will be: 08/01/2007)
◉ Guest is not checking out at this time.

SUBMIT >>

- To begin the billing process, hotels must first qualify and check-in the survivor
(**NOTE: refer to the User Guide Survivor Qualification & Check-in for further instructions**)

- Click **Submit Billing** on the navigation bar to access the **Survivors Available for Billing** screen

- The **Survivors Available for Billing** screen displays an overview of all survivors checked into the lodging provider
- Lodging providers have the flexibility to either partially bill for ELA survivor stays or complete final billing at their convenience
NOTE: Each survivor stay can only be billed once per day)
- Under **Options**, click the **BILL** button to issue a bill for the survivor's stay

- On the **Bill Stay** screen, enter all applicable information in the fields provided, including opting to either check out the survivor or leave checked in, based on their in-house status
- Click **Submit**

20

LODGING PROVIDER SUMMARY

- **Survivor Summary** provides an overview of the survivor history for your property

- Click **Survivor Summary** on the navigation bar to access a summarized view of survivors registered with your property

- The Survivor Summary screen offers an assortment of options. To access these options, perform the following:
- Click **DOWNLOAD FILE** to obtain an Excel™ spreadsheet of the property's entire survivor summary file
- If applicable, click **VIEW ALERTS** to access survivor specific account updates
- Click **DETAILS** under the **Options** column to access a detailed view of the survivor's profile

LODGING PROVIDER SUMMARY (CONTINUED)

Guest Detail ❓ HELP

Guest: ELA986 TEST986

The following rooms are approved for this guest:

(You can only check in one room at a time)

Available Rooms	Room Qualification Dates	Options
1	07/31/2007 - 08/15/2007	Check In

Room 55 [Edit This Check In]

Status: CHECKED IN	Date In: 07/31/2007
Folio Number: 15a	Date Out: ---
Billed From: ---	Billed Through: ---
Allowed Daily Room Rate: $50.00	Allowed Daily Tax Amount: $1.50
*This is the amount FEMA will pay	Allowed Total Daily Rate: $51.50*

Cancel Check In

Check Out

- The **Survivor Details** screen provides an overview of the survivor's check-in information

- If applicable, the **Survivor Details** screen displays additional rooms available for the survivor
- If necessary, click **Check In** to assign an additional room for the survivor.
(NOTE: refer to the User Guide Survivor Qualification & Check-in section for further instructions)

- If necessary, click **Edit This Check In** to access the **Edit Room** screen

- If necessary, click **Cancel Check In** to void the survivor's check in from your lodging provider registry

- If necessary, click **Check Out** to access the survivor's **Check Out** screen. In most cases, it is best to submit final billing at the same time as checking out survivors.

(NOTE: refer to the User Guide Submit Billing section for further instructions)

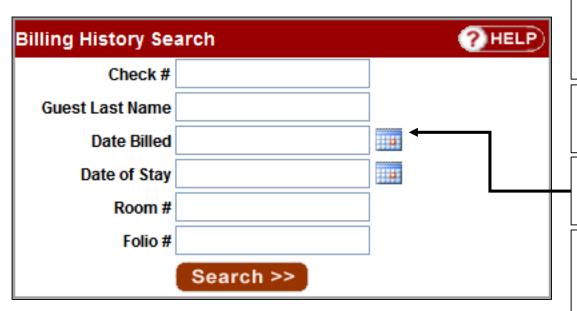# LODGING PROVIDER SUMMARY (CONTINUED)

- The **Edit Room** screen allows lodging partners to revise a survivor's check-in information
- Enter the revised survivor check-in information in the fields provided
- Click **SUBMIT** to complete the revised survivor check in process

- The **Check Out** screen allows properties to check out a survivor
- Enter the check-out date in the field provided
- Click **SUBMIT** to complete the survivor check out process.
- Lodging providers must submit survivor billing in order to receive payment

(NOTE: refer to the User Guide Submit Billing section for further instructions)

23

BILLING HISTORY

- **Billing History** provides an overview of all submitted billings. Detailed views of survivor billings and payment inquiries are available for convenient recordkeeping

- Click **Billing History** on the navigation bar to access a summarized view of a property's historical billing record

- The **Billing History Search** dialog box allows user to customize their search

- The **Billing History** screen offers an assortment of options. To access these options, perform the following:
- Click **DOWNLOAD FILE** to obtain an Excel™ spreadsheet of the property's entire survivor billing file
- If applicable, click **VOID** under the **Actions** column to cancel the survivor billing
- Please contact CLC via the ELA Program Lodging Support Center (1-866-545-9865) for instructions on how to **ADJUST** billing for survivor stays which reflect status of PROCESSED
- Click **DETAILS** under the **Actions** column for a detailed view of the survivor billing

Billing History

The information below is available for download: DOWNLOAD FILE

Guest	Folio #	Room #	Billed Nights of Stay	Total Billed	Total Paid	Billed Date	Check #	Check Date	Status	Actions
ELA611 TEST611	100	1408	7/30/2007 - 7/30/2007 (1 Nights)	$0.00	$0.00	7/31/2007			VOIDED	DETAILS
ELA611 TEST611	100	1408	7/30/2007 - 7/30/2007 (1 Nights)	$82.50	$0.00	7/31/2007			BILL SUBMITTED	DETAILS VOID

24

BILLING HISTORY

Bill History Detail ? HELP

Guest	Qualification End Date
ELA611 TEST611	01/31/2008
Folio Number	Billed Date
100	07/31/2007
Room Number	Billed Period
1408	07/30/2007 - 07/30/2007
Total Billed	Total Paid
$82.50	$82.50

Check Info

Date	Amt Billed	Amt Paid	Check #	Check Date
07/31/2007	$82.50	$82.50	85476	08/02/2007

<< Back

- The **Bill History Detail** screen displays:
- The survivor's qualification end date, room information, and cumulative rates
- Complete itemized history of all billings submitted for the survivor
- Click **Back** to return to the **Billing History** screen

- Thank you for your participation with the Emergency Lodging Assistance (ELA)Program
- For additional questions, the ELA Program Lodging Support Center can be reached by phone at **1-866-545-9865** (Monday through Friday, 8 a.m. to 5 p.m. CST) or by email at **femahousing@clclodging.com**

LODGING PROVIDER PAYMENT PROCESSIONG INSTRUCTIONS

ELA Virtual Card Payment Program!

- You will receive a remittance advice and a MasterCard account number via email each time we have approved a payment to you.

- You will be issued a 6-digit prefix you will need to retain for all future payments.

- You will receive an email notification of payment for listed invoices with a unique 10-digit number.

- Combine the 6-digit prefix with the unique 10-digit number to create your complete Mastercard account number. You will process this payment like any other credit card transaction.

- Your funds settlement will be received within 24-48 hours through your merchant processor.

- Your remittance advice will be emailed from our payment processor, Comdata. Please make sure your email system will accept messages from the following email addresses:

  payment.advisory@comdata.com, vendorenrollment@comdata.com and iconnectdata@comdata.com.

- The "Billing History" tab on your ela.corplodging.com account will have all of the details for this payment.

LODGING PROVIDER PAYMENT PROCESSIONG INS

Example of an actual payment email notification