U. S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY ACTION REQUEST

See Reverse for Paperwork Disclosure Notice

OMB. No. 1660-0047 Expires November 30, 2007

ACTION REQUEST		·		Disclosure Notice Expires November 30, 2007		
I. REQUESTING	ASSISTA	ANCE (To be cor	mpleted !	by Requestor)		
1. Requestor's Name (Please print)	2. Tit				3. Phone	∍ No.
4. Requestor's Organization	5. Fa:	5. Fax No. 6. E-Mail Address				
II. REQUESTED	ASSISTA	NCE (To be cor	npleted i	by Requestor)		
1. Description of Requested Assistance:		·				
2. Quantity 3. Priority Lifesaving High		Lifesaving Sustainin Medium	1g	Normal	4. Date a	and Time Needed
5. Delivery Site Location			6. Site Poi	int of Contact (POC)		
		 -	7. 24 Hou	ur Phone No.	8. Fax No	o.
9. State Approving Official Signature		·			10. Date	e
III. SOURCING THE REQUE	ST - REV	/IEW/COORDIN/	ATION (C	perations Section On	ıly)	
OFA Action Officer 4. FEMA Project Officer	IENT OF V	4. Date 7. Assigned to WORK (Operatio 2. 24 Hour Phor 5. 24 Hour Phor	one No.	2. Donations Other (Explain Requisitions Procurement Interagency Ag Mission Agreer 5. Time Assigned	greement	
	ON TAKEN	9. Cost Estimate N (Operations S	Section O	Only) Accountable Property Coord	thw bereits	. 400
Disposition					difference	AFO
ECAPS/NEMIS Task ID:		RMATION (FEMA equest No.		NLY) Program Code/Event No.		
Received by (Name and Organization)	State	······································		Date/Time Submitted		Originated as verbal

PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for this form is estimated to average 20 minutes per resposne. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the needed data, and completing, reviewing, and submitting the form. You are not required to respond to this collection of information unless it displays a valid OMB control number. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing this burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 500 C Street, SW, Washington, DC, 20472, Paperwork Reduction Project (1660-0047). Please do not send your completed form to the above address.

INSTRUCTIONS

Items on the Action Request form that are not specifically listed are self-explantory. Indicate "see attached" in any field for which additional space or more information is required.

Completed by requestor. l. Who is requesting assistance?

Completed by requestor. 11. What needs to be done?

Description of Assistance Requested: Detail of resource shortfalls, statement of deliverable, or simply state problem/need.

Priority: The requestor's priorty, which may differ from the priorty in BOX III.

Site POC: The person at the delivery site coordinating reception and utilization of the requested resources. 24-hour contact information required.

Signature certifies that: If for DFA or TA, State Approving Official:

- (1) State and local governments cannot perform, nor contact for the performance of the requested word;
- (2) Work is required as a result of the event, not a pre-existing condition; and
- (3) The State is providing the required assurances found in 44 CFR, 206, 208.

Action Review/Coordination (OPS Section Unse Only): Completed by the Operations Section Chief. 111.

Accept/Reject: Operations Section Chief accepts or rejects the request; provide reason if rejection. If request accepted, coordinates with others, i.e., Log ESF's, begins to determine best means of fulfilling request. All involved in coordination should check appropriate box and initial or print their name.

Assigned to: Operations Section Chief assigns tasks origination. Operations Section Chief may also indicate the Action Officer if known, or tasked organization may make this assignment. This may be Emergency Support Function, internal FEMA Organization (i;e;, Logisitcs), or other organization.

Operations Section Chief provides date and time Date/Time Assigned:

FEMA Operations Section Chief-assigned priority, may be different than Section II. **Priority:**

Provided by Operations Section Chief; a Region PFT; 24-hr phone/fax required . Information used in NEMIS. FEMA P.O.:

Ops Section Chief obtains from OFA if request fulfilled by a MA; 24-hr phone/fax required. Information used in **OFA Action Officer:**

NEMIS.

Justification/Statement of Work: Description of taks to be performed. Could be to assess a problem and report back, or could be to proceed with a specific action. If 61-1, 40-1, or MA, this goes in "justification" tab in NEMIS.

Action Taken (OPS Section Use Only): Comleted by Ops Section Chief, MAC, Logistics. IV.

Ops Section Chief, MAC, or LOG should note what type of document the action resulted in by "checking" **Action Request Results:** the appropriate box i.e., Mutual Aid, Donations, Requisition, Porcurement, IA, MA, Other. If "Other" is selected write in appropriate resposne or state "se below" and give detail description in "Disposition" filed. "Disposition" field should note stepts taken to complete the Action, and personnel, sub-tasked agencies, contracts and other resources utilized.

TRACKING INFORMATION. Compleed by Action Tracker. Required for all request.