DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency MISSION ASSIGNMENT (MA)

## PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for this form is estimated to average 20 minutes per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the needed data, 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 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 20472-3100, Paperwork Reduction Project (1660-0047). NOTE: Do not send your completed form to this address.									
I. TRACKING INFORMATION (FEMA Use Or	nly)								
State HI (Hawaii) Incident:2023081002-Hawaii August 2023 Wildfires					Resource Request Number 3568-856068				
Program Code/Event Number 4724DR-HI: WILDFIRES					Date/Time Received 08/17/2023 00:56				
II. ASSISTANCE REQUIRED				□ See	Attach	ned			
Assistance Requested State of Hawaii ESF04 requests Burn Area Emergency Response	e (BAER) team	1							
Delivery Location HIEMA, 200 S High St Wailuku, HI 96793	elivery Location HIEMA, 200 S High St Wailuku, HI 96793		Internal Control Number			Date/Time Required 08/17/2023			
Initiator/Requestor Name	24 Hour Phone I	e Number Email Address					Date		
Michael Walker	(808) 348-5834	8) 348-5834 michael.j.walker@haw			aii.gov		08/17/2023		
Site POC Name	24 Hour Phone I		Email Addres	S			Date		
Michael Walker	(808) 348-5834	4				08/17/2023			
III. INITIAL FEDERAL COORDINATION (Operation	-								
Action to:			Date/Time Priority						
□ RSF: 08/17/2023 00:38 □ 2. Life sustaining □ 4. No							•		
IV. DESCRIPTION (Assigned Agency Action	Officer)				X	See Atta	ached		
<u>Statement of Work</u> In support of the State of Hawaii and as directed by and in coordi Response. This will include resource specialists, team leaders, an Your agency must validate the unliquidated MA balance at least anni later than the third business day after fiscal quarter end close. Inform	nd support staff. ually as stipulated by F ation can be submitted	EMA to main	tain reimbursable a	authority. Ac	crual dat	ta must also t			
visit http://www.fema.gov/federal-agencies-providing-disaster-assista	isit http://www.fema.gov/federal-agencies-providing-disaster-assistance.								
Assigned Agency USDA-FS (USDA-FS (STATE/PRIV FORESTRY))			Projected Start Date 08/18/2023			Estimated Projected End Date 09/01/2023			
IX     New or     □     Amendment to MA # :		Total Cost	Estimated \$75,0	ated Total Required \$75,000.00		this Obligation Cycle			
ESF/OFA/RSF Action Officer BARBARA GERINGER-FRAZIER			Phone # (202) 577-4827			Email barbara.geringer-frazier@usda.gov			
V. COORDINATION (FEMA Use Only)									
Type of MA:       Direct Federal Assistance       Federal Operations Support         X       State Cost Share (0%, 10%, 25%)       State Share (0%)									
State Cost Share Percent       25 %       State Cost Share Amount: \$18,750.00									
Fund Citation:       2023-06-4724DR-9094-XXXX-2508-D       Appropriation code: 70X0702									
Mission Assignment Manager (Preparer) SARAH ANONTAVARA 🍤							Date 08/17/2023		
**FEMA Project Manager/Branch Director (Program Approval) DELANE GARNER 🗫						Date 08/17/2023			
**Comptroller/Funds Control (Funds Review) JON MANNS S						Date 08/17/2023			
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## **MISSION ASSIGNMENT (MA)**

VI. APPROVAL										
*State Approving Official (Required for DFA)		Date								
**Federal Approving Official (Required for all)	Date 08/17/2023									
VII. OBLIGATION (FEMA Use Only)										
Mission Assignment Number 4724DR-HI-USDA-FS-01	Amount This Action \$_	75,000.00	Date/Time Obligated	: 08/17/2023						
Amendment Number 00	Cumulative Amount \$	75,000.00	Initials: IFMIS							
** Signature required for all MAs.										
INSTRUCTIONS										
Items on the Mission Assignment (MA) form that are not listed are self-explanatory.										
I. TRACKING INFORMATION. Completed by Resource Support Section or Operations staff. Required for all requests.										
<u>State:</u> If multi-State, choose State most likely to receive resource(s), (i.e., when using 7220-SU Program Code) <u>Resource Request No.</u> : Based on chronological log number. Used for tracking. <u>Program Code/Event No.</u> : The pre-declaration, emergency, or major disaster number assigned for funding the event. Examples: 7220-SU, 3130-EM, 1248-DR.										
II. ASSISTANCE REQUESTED. Completed by requestor.										
Assistance Requested: Details from the Resource Request Form will provide information concerning the assistance requested. Internal Control No.: Internal requestor reference, log, or control number, if applicable. Initiator/Requestor: The initiator may be an individual filling out the mission assignment and making a request on behalf of the POC. POC Name: The person coordinating reception and utilization of the requested resources. 24-hour contact information required.										
III. INITIAL FEDERAL COORDINATION. Completed by FEMA Personnel with Delegated Authority.										
Action to: May be Emergency Support Function (ESF), Recovery Support Function (RSF), internal FEMA organization, or other organization, which assigns the Action Officer.										
Remainder of MA used only if solution is to request Federal agency to perform reimbursable work under (MA). Deliberate validation and verification of information must occur before MA is completed and issued.										
IV. DESCRIPTION. Completed by assigned agency Action Officer.										
<u>Statement of Work:</u> Detailed description of work to be performed that includes: Overview of MA, objectives, tasks, resources, personnel, deliverable, location, period of performance and comprehensive cost estimate for period of performance. Statement of Work may be attached. Additional guidance concerning the writing of a Statement of Work can be found in the Mission Assignment Guide and FAR. <u>Assigned Agency:</u> Agency receiving the MA from FEMA. Activities within the scope of an ESF/RSF result in an MA to primary agency. Cite subordinate organization if applicable. Example; DOT-FAA, COE-SAD. <u>Projected Start/End Date</u> : If end date is not clear, estimate and budget for 30, 60, or 90 days, then reevaluate. TBD is not acceptable; a date must be entered. <u>Total Cost Estimate</u> : Enter dollar value and attach a detailed budget outlining personnel, equipment, contract, sub-tasked agency, travel and other costs. The cost estimate should include the total cost projection for the MA across the entire length of the MA. The 90 day obligation cycle is used to obligate funding in 90 day increments when completion period is expected to exceed 90 days.										
<ul> <li>COORDINATION. Completed by MAM, except for Project Manager and Comptroller signatures.</li> <li>Type of MA: Select only one.</li> <li>Appropriation Code: Static data. Do not change. This is for information only, should not be used to report internal agency finances to Treasury.</li> <li>Reporting: MA agencies are required to provide reporting as determined by the Program Manager.</li> <li>VI. APPROVAL. Completed by State Approving Official and Federal Approving Official.</li> </ul>										

## VII. OBLIGATION. Completed by Financial Specialist

<u>Mission Assignment No</u>.: Assigned in FEMA financial system chronologically using assigned agency acronym and two digit number. <u>Amendment No</u>.: Note supplement number. For example: COE: SAD-01, Supp. 1, or DOR-08, Supp. 3. <u>Amount this Action</u>: Taken from total cost estimate above.

Cumulative Amount: Cumulative amount for this MA, including amendments.

## **Additional Statement of Work**

These specialists will lead assessment teams on each fire, train, and coordinate specific resource area groups on each team to ensure the mission is accomplished safely and provides the information needed for the next phase of recovery.

USFS support will include but is not limited to:

- Size up burned areas and plan assessment by resource area - Train assessment team specialists

- Coordinate logistics and methodologies for all assessment team specialists

- Oversee/advise assessments, analysis, and reporting ADDITIONAL NOTES from FEMA:

MA task orders (MATOs) may be issued by FEMA for specific requirements, personnel, location(s), date(s), and duration of assignment(s). Agencies will be reimbursed for all eligible expenses pursuant to 44 CFR. Supporting documentation is required for reimbursement.

All equipment and supply purchases must be coordinated with FEMA. If approved, documentation is necessary to ensure reimbursement.

Activation of agency command center(s), if required, must be coordinated with FEMA as a separate MA.

The mission assigned agency is responsible for ensuring that all activity is properly authorized, goods are received, services are provided, and that costs are reasonable and

supported by documentation maintained by the respective agency MAs shall be considered for closure after 180 days with no financial activity in accordance with FEMA CFO Bulletin #157. For MAs still operationally open, requests for additional obligations may be withheld if no invoicing, ULO Validation, or additional justification has been provided.