DEPARTMENT OF HOMELAND SECURITY
FEDERAL EMERGENCY MANAGEMENT AGENCY
MISSION ASSIGNMENT (MA)

O.M.B. NO. 1660-0047
Expires March 31, 2014

I. TRACKING INFORMATION (FEMA Use Only)

State
TX (Texas) Incident:2017082301-Hurricane Harvey

NEMIS Number
1509-236606

Program Code/Event Number
4332DR-TX: HURRICANE HARVEY

Date/Time Received
08/26/2017 14:06

II. ASSISTANCE REQUIRED

☐ See Attached

Assistance Requested
Activate USFS to the Region 6, 800 N. Loop 288, Denton, TX 76209, or other facilities in

support of response operations.

Delivery Location	Internal Control Number	Date/Time Required
Region 6 , 800 N Loop 288 Denton, TX 76209	1855-286393	08/27/2017

Initiator/Requestor Name	24 Hour Phone Number	Email Address	Date
Laverm Young	(940) 383-7205	laverm.young@fema.dhs.gov	08/26/2017
Site POC Name SALTERS, ARCHIE PHILLIP	24 Hour Phone Number (940) 898-5222	Email Address archie.salters@fema.dhs.gov	Date 08/26/2017

* State Approving Official (Required for DFA and TA)	Date

III. INITIAL FEDERAL COORDINATION (Operations Section)

Action to:
☒ ESF #: ___4___
☐ Other: _____

Date/Time
08/26/2017 13:42

Priority
☐ 1. Lifesaving
☐ 2. Life sustaining
☒ 3. High
☐ 4. Medium

IV. DESCRIPTION (Assigned Agency Action Officer)

☐ See Attached

Statement of Work
As directed by and in coordination with FEMA, US Forest Service (USFS) will provide appropriate personnel Region 6, 800 N Loop 288, Denton, TX
76209, or other facilities in support of response operations.

Your agency must validate the unliquidated MA balance at least annually as stipulated by FEMA to maintain reimbursable authority. Accrual data must also be provided to FEMA no later than the third business day after fiscal quarter end close. Information can be submitted FEMA-Disaster-MA-ULO@DHS.gov

Assigned Agency	Projected Start Date	Projected End Date
USFS (U.S. FOREST SERVICE)	08/25/2017	09/11/2017

☒ New or ☐ Amendment to MA #:

Total Cost Estimate
$10,000.00

ESF/OFA Action Officer	Phone No.	Email
PAUL GELLERSTEDT	(470) 585-9154	pgellerstedt@fs.fed.us

V. COORDINATION (FEMA Use Only)

Type of MA:
☐ Direct Federal Assistance State Cost Share (0%, 10%, 25%)
☐ Technical Assistance State Share (0%)
☒ Federal Operations Support State Share (0%)

State Cost Share Percent   0.0   %

State Cost Share Amount: $ 0.00

Fund Citation: 2017-06-4332DR-9064-XXXX-2501-D

Appropriation code: 70X0702

Mission Assignment Manager (Preparer) ARIANNE DERUISE	Date 08/26/2017
** FEMA Project Manager/Branch Director (Program Approval) ARCHIE SALTERS	Date 08/26/2017
** Comptroller/Funds Control (Funds Review) BOUVIA, BARBARA J.	Date 08/26/2017

VI. APPROVAL

*State Approving Official (required for DFA and TA):	Date
**Federal Approving Official (required for all): LAVERM YOUNG JR	Date 08/26/2017

VII. OBLIGATION (FEMA Use Only)

Mission Assignment Number ___4332DR-TX-USFS-01___	Amount This Action $ 10,000.00	Date/Time Obligated 08/26/2017
Amendment Number ___00___	Cumulative Amount $ 10,000.00	Initials: IFMIS

* Signature required for Direct Federal Assistance and Technical Assistance MAs.
** Signature required for all MAs.

Additional Mission Statement

Funding for USFS command center(s), if authorized by FEMA, will be provided under

a separate MA.

All purchases and expenditures must be coordinated with FEMA. Prior approval, from the Federal Approving Official (FAO), is necessary to

ensure reimbursement. Agencies will be reimbursed for all eligible expenses pursuant to 44 CFR 206.8, ???Reimbursement of Other Federal

Agencies.???

Mission Assignment Task Orders (MATOs) may be issued for specific personnel, requirements, locations, dates, and duration of assignments.

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 agencies.

PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for this form is estimated to average 3 minutes 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 it displays a valid OMB control number. 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, 1800 South Bell Street, Arlington, VA 20598-3005, Paperwork Reduction Project (1660-0047). **Note: Do not send your completed form to this address.**

INSTRUCTIONS

Items on the Mission Assignment (MA) form that are not listed are self-explanatory.

I.   TRACKING INFORMATION. Completed by Action Tracker or other Operations staff. Required for all request.

State: If multi-State, choose State most likely to receive resource(s), (i.e., when using 7220-SU Program Code)
Action Request No.: Based on chronological log number. Used for tracking.
Program Code/Event No.: The pre-declaration, emergency, or major disaster number assigned for funding the event. Examples: 7220-SU, 4220-AD, 3130-EM, 1248-DR.

II.   ASSISTANCE REQUESTED. Complete by requestor.

Assistance Requested: Detail of resource shortfalls, give specific deliverables or simply state the problem.
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.
State Approving Official: Signature certifies that State and local government cannot perform, nor contract for the performance, of the requested work and agrees to pay cost share if any.

II.   INITIAL FEDERAL COORDINATION. Completed by the Operations Section Chief.

Action to: Operations Chief notes assigned organization. May be Emergency Support Function (ESF), internal FEMA organization, or other organization, which assigns the Action Officer.

Rest of MA used only if solution to request Federal agency to perform reimbursable work under (MA). Best solution may be internal resources or commercial vendor. Deliberate evaluation must occur before MA is completed and MA is issued.

IV.   DESCRIPTION. Completed by assigned agency Action Officer.

Statement of Work: Description steps to complete the request. Include discussion of personnel, equipment; sub tasked agencies, contracts and other resources required. This can be provided as an attachment.
Assigned Agency: Agency receiving the MA from FEMA. Activities within the scope of an ESF result in an MA to the primary agency. Cite subordinate organization if applicable. Example; DOT-FAA, COE-SAD.
Project Completion Date/End Date: If end date is not clear, estimate and budget for 30 or 60 days, then re-evaluate. TBD is not acceptable; some date must be entered into this field.
Total Cost Estimate: A budget can be attached outlining personnel, equipment, contract, sub-tasked agency, travel, and other costs.

V.   COORDINATION. Completed by MAM, except for Project Manager and Comptroller signatures. Type of MA: Select only one.
Appropriation Code: Static data. Do not change. This is for information only, should not be used to report internal agency finances to Treasury.

VI.   APPROVAL. Completed by State Approving Official and Federal Approving Official.

VII.   OBLIGATION. Completed by Financial Specialist
Mission Assignment No.: Assigned in FEMA financial system chronologically using assigned agency acronym and two digit number.
Amendment No.: Note supplement number. For example: COE: SAD-01, Supp. 1, or DOR-08, Supp. 3.
Amount this Action: Taken from total cost estimate above.
Cumulative Amount: Cumulative amount for this MA, including amendments.