| DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY MISSION ASSIGNMENT (MA) | | | | See Reverse for Paperwork Burden Disclosure Notice | | | | O.M.B. NO. 1660-0047 Expires March 31, 2014 | | |
|---|--|--|--|---|-----------------------|-----------|--|--|-----------------------|--|
| I. TRACKING INFORMATION (FEMA Use Only) | | | | | | | | | | |
| State TX (Texas) Incident:2017082301-Hurricane Harvey | | | | | | | NEM | NEMIS Number 1509-237448 | | |
| Program Code/Event Number 4332DR-TX: HURRICANE HARVEY | | | | | | Date | Date/Time Received 09/01/2017 00:35 | | | |
| II. ASSISTANCE REQUIRED | | | | | | | | | | |
| Assistance Requested Amendment #1: Amend to correct Start date to 8/27/17 as this replaced USFS-03. Activate ESF4 resources to support Regional Staging Areas in Texas. | | | | | | | | | | |
| Delivery Location Texas A&M Forest Service, 200 Technology Way College Station, TX 77845 | | | Internal Control Number D 1855-291582 | | | | | ate/Time Required 09/01/2017 | | |
| Initiator/Requestor Name Gisela Ryan-Bunger | 24 Hour Phone I (512) 424-2208 | | | mail Address isela. ryan-bunger@dps.texas. | | | gov | | Date 09/01/2017 | |
| Site POC Name 24 Hour Phone KELLER, CHARISSA MAXINE 24 Hour Phone | | | mber Email Address charissa.keller@fema.dhs.gov | | | | Date 09/01/2017 | | | |
| * State Approving Official (Required for DFA and TA) Date | | | | | | | | | Date | |
| III. INITIAL FEDERAL COORDINATION (Operations Section) | | | | | | | | | | |
| Action to: ESF #: _4 D | Priority | | | | _ifesavii _ife sus | 0 | | 3. High 4. Medium | | |
| 7. DESCRIPTION (Assigned Agency Action Officer) | | | | | | ☐ See | See Attached | | | |
| Federal Staging Areas (FSAs), or other logistics facility. This support may include, but not limited to set-up, receipt, staging and distribution of truck/trailer combinations. 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 USFS (U.S. FOREST SERVICE) | | | Pro | Projected Start Date 08/30/2017 | | | | Projected End Date 09/13/2017 | | |
| New or Amendment to MA #: 4332DRTXUSFS0400 | | | | Total Cost Estimate \$0.00 | | | | | | |
| ESF/OFA Action Officer | | | | Phone No. Em | | | Email | nail pster@tfs.tamu.edu | | |
| CYNTHIA FOSTER (979) 218-23 | | | | | | | CIOSIEI @ I | 15.181110 | .edu | |
| 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%) | | | | | | | | | utions Support)%) | |
| State Cost Share Percent 25.0 % State Cost Share Amount: \$ 0.00 | | | | | | | | | | |
| Fund Citation: 2017-06-4332DR-9064-XXXX-2508-D Appropriation code: 70X0702 | | | | | | | | | | |
| Mission Assignment Manager (Preparer) STACY MCMAHON | | | | | | | | | Date 09/01/2017 | |
| ** FEMA Project Manager/Branch Director (Program Approval) CHARISSA KELLER | | | | | | | | Date 09/01/2017 | | |
| ** Comptroller/Funds Control (Funds Review) JONES III, CLIFFTON H. | | | | | | | | | Date 09/01/2017 | |
| VI. APPROVAL | | | | | | | | | | |
| *State Approving Official (required for DFA and TA): | | | | | | | | Date | | |
| **Federal Approving Official (required for all): ANDREW SABATA | | | | | | | | | Date 09/01/2017 | |
| VII. OBLIGATION (FEMA Use Only) | | | | | | | | | | |
| Mission Assignment Number4332DR-TX-USFS-04 | Amount This Action \$ 0.00 Date/Time | | | | | me Obliga | Obligated 09/01/2017 | | | |
| Amendment Number 01 | Cumulative Amount \$ 3,000,000.00 Initials: IF | | | | | IFMIS | MIS | | | |
| * Signature required for Direct Federal Assistance and Technical Assistance MAs. ** Signature required for all MAs. | | | | | | | | | | |

Additional Mission Statement

If necessary, provide for housing, feeding, showering, fueling, laundry, incidental medical, and security needs for personnel assigned to support the logistics facility, during the response phase of disaster operations, including support personnel, as needed, to ensure facility oversight, medical support, and safety/health.

Utilize USFS, DOI, other Federal agency and State/local resources under existing agreement, as appropriate.

The support provided may include, but is not limited to the following deliverables:

- personnel to provide logistical support for ISB, FSA, or other Federal logistics facilities.

- Includes off-site support personnel such as dispatchers, incident finance personnel, etc.

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.

Total estimated costs are for planning purposes only and are subject to change. The cost estimate does not represent all of the eligible costs, which could be reimbursed.

Mission Assignment Task Orders (MATOs) will be issued for specific personnel requirements, locations, dates, and duration of assignments. The purpose of the MATO is to direct specific activities within the scope of an existing MA. A MA TO may be used if no additional funding is needed and the scope of the existing MA is not Changed. If, at a later time, additional funding or completion date extensions are required, an amendment to the MA shall be issued to include the appropriate information. New requirements, outside the scope of the original MA, require the issuance of a new MA.

Your agency must validate the un-liquidated 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

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.

<u>State</u>: If multi-State, choose State most likely to receive resource(s), (i.e., when using 7220-SU Program Code) <u>Action 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, 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.

<u>Initiator/Requestor</u>: The initiator may be an individual filling out the mission assignment and making a request on behalf of the POC. <u>POC Name</u>: The person coordinating reception and utilization of the requested resources. 24-hour contact information required. <u>State Approving Official</u>: 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.

<u>Statement of Work</u>: 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.

<u>Assigned Agency</u>: 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. <u>Appropriation Code</u>: 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

<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.

Amount this Action: Taken from total cost estimate above.

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