

DEPARTMENT OF HOMELAND SECURITY
Federal Emergency Management Agency
RESOURCE REQUEST FORM (RRF)

O.M.B. No. 1660-0002
Expires May 31, 2017

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. REQUESTING ASSISTANCE (To be completed by Requestor)

1. Requestor's Name Scott Sorocco	2. Title Ops Chief	3. Phone No. 202-809-5885
4. Requestor's Organization: FEMA	State: SC	5. Fax No.
		6. Email Address: scott.sorocco@fema.dhs.gov

II. REQUESTING ASSISTANCE (To be completed by Requestor)

1. Description of Requested Assistance:
Activate USFS to the RRCC, IOF JFO or other facilities in support of response operations.
Requested Resources: **Activation - USFS**

2. Quantity 0	3. Priority <input type="checkbox"/> Lifesaving <input type="checkbox"/> Life Sustaining <input type="checkbox"/> Normal <input checked="" type="checkbox"/> High	4. Date and Time Needed 09/09/2018 07:00:00
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5. Delivery Site Location Name: Various as directed Address: - City: - State: SC Remarks:	Site: County: Zip: 00000	6. Site Point of Contact (POC) Scott Sorocco 7. 24-Hour Phone No. 202-809-5885 8. Fax: Email: scott.sorocco@fema.dhs.gov
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9. State Approving Official Signature	10. Date and Time:
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III. SOURCING THE REQUEST - REVIEW/COORDINATION

1. <input checked="" type="checkbox"/> OPS/RCBD Review by: Electronically signed by lisa.gniadybanford@fema.dhs.gov as IS R04 RS (RCBD) Resource and Capability Branch Director on 09/17/2018 08:55:00 <input type="checkbox"/> LOG/OSGS Review by: <input type="checkbox"/> Other Review by: <input type="checkbox"/> Other Review by: <input type="checkbox"/> Other Review by:	2. Source: <input type="checkbox"/> Contract <input type="checkbox"/> Deployment Tracking System (DTS) <input type="checkbox"/> Donations <input type="checkbox"/> Logistics Supply Chain Management System (LSCMS) <input type="checkbox"/> Interagency Agreement (IAA) <input checked="" type="checkbox"/> Mission Assignment (MA) <input type="checkbox"/> Purchase Card <input type="checkbox"/> Other <input type="checkbox"/> Not Identified	3. Assigned to: Agency: USFS ESF/RSF: ESF 4: Firefighting Date/Time: 09/17/2018 08:00:00
4. Immediate Action Required <input type="checkbox"/> Yes <input type="checkbox"/> No		

IV. STATEMENT OF WORK

1. OFA Action Officer Paul Gellerstedt	2. 24-Hour Phone No. 404-585-9154	3. Fax: Email: pgellerstedt@fs.fed.us
4. FEMA Project Manager Kertz Hare	5. 24-Hour Phone No. 404-909-1600	6. Fax: Email: kertz.hare@fema.dhs.gov

7. Statement of Work:
As directed by and in coordination with FEMA, US Forest Service (USFS) will provide appropriate personnel to the RRCC, IOF, JFO, or other facilities in support of disaster operations.

**MA task orders may be issued by FEMA for specific requirements, personnel, location(s), date(s), and duration of assignment(s).
Equipment purchases are not allowed
Agencies will be reimbursed for all eligible expenses pursuant to 44 CFR. Supporting documentation is required for reimbursement.
If required and authorized by FEMA, activation of agency command center(s) will be covered under 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 agencies.
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.**

8. Estimated Completion Date: 09/30/2018 00:00:00

9. Current Estimated Cost: \$50,000.00

V. ACTION TAKEN

Accepted

Rejected

Requestor Notified

2. Reason/Disposition:

RESOURCE REQUEST FORM (RRF)

TRACKING INFORMATION (FEMA Use Only)

ECAPS / NEMIS Task ID: 1509-270109	Resource Request No. 2178-13346	Program Code/Event No.	<input type="checkbox"/> Originated from State <input type="checkbox"/> Originated as verbal
Received by (Name and Organization):	State:	Date/Time Submitted: 09/17/2018 08:00:00	

INSTRUCTIONS

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

I. Who is requesting assistance? Completed by requestor.

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

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

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

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

If for Direct Federal Assistance (DFA), State Approving Official: Signature certifies that:

- (1) State and local governments cannot perform, nor contract for the performance of the requested work;
- (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, Section 206.208.

III. Action Review/Coordination (OPS Section Use Only): Completed by the Operations Section Chief or Resource Capability Branch Director.

Accept/Reject: Operations Section Chief or Resource Capability Branch Director accepts or rejects the request; provide reason if rejection. If request accepted, coordinates with others, i.e., Branch Directors or Group Supervisors, 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 or Resource Capability Branch Director assigns tasks origination, may indicate the OFA Action Officer. 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.; Logistics), or other organization.

Date/Time Assigned: Operations Section Chief or Resource Capability Branch Director provides date and time of when sourcing should begin.

IV. Statement of Work (OPS Section Use Only): Completed by the Operations Section Chief or Resource Capability Branch Director.

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

FEMA Project Manager: Provided by Operations Section Chief; a Region PFT; 24-hr phone/fax required. Information used in eCAPS. Statement of Work: Description of tasks to be performed. Could be to assess a problem and report back, or could be to proceed with a specific action. If 40-1 or MA, this goes in "justification" tab in eCAPS.

V. Action Taken (OPS Section Use Only): Completed by Operations Section Chief, Resource Capability Branch Director, MA Unit or Logistics.

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

TRACKING INFORMATION. Completed by Action Tracker. Required for all requests.

OTHER DETAILS NOT PART OF RESOURCE REQUEST FORM

Enabler:

Enabler

I-/+ Hours:

MA#:

[4394DR-SC-USFS-01](#)

MA Category:

DFA FOS Amendment Task Order

Movement Coordination: