

U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY <b>ACTION REQUEST</b>		See Reverse for Paperwork Disclosure Notice	OMB. No. 1660-0047 Expires January 31, 2011
<b>I. REQUESTING ASSISTANCE (To be completed by Requestor)</b>			
1. Requestor's Name (Please Print) Susan Fisher		2. Title ESF-10 Lead	
3. Phone No. 816-718-4285		4. Requestor's Organization EPA	
5. Fax No.		6. E-Mail Address susan.fisher@epamail.epa.gov	
<b>II. REQUESTED ASSISTANCE (To be completed by Requestor)</b>			
1. Description of Requested Assistance:  Mission Assignment to ESF-10 to conduct oil and hazardous materials field operations, including cleanup and disposal of hazardous materials and oil and response to orphaned containers to mitigate actual and potential threats to public health and safety.			
2. Quantity 1	3. Priority <input type="checkbox"/> Lifesaving <input checked="" type="checkbox"/> High	<input type="checkbox"/> Lifesaving Sustaining <input type="checkbox"/> Normal	4. Date and Time Needed 08/19/2011
5. Delivery Site Location DR-1998-IA JFO-West Des Moines		6. Site Point of Contact (POC) Christian M. Van Alstyne	
9. State Approving Official Signature Craig Bargfrede		7. 24 Hour Phone No. 816-728-3324	8. Fax No.
		10. Date 23 Aug 11	
<b>III. SOURCING THE REQUEST - REVIEW/COORDINATION (Operations Section Only)</b>			
1. <input checked="" type="checkbox"/> OPS Review by: <u>Kathryn Engel</u> <input type="checkbox"/> Log Review by: _____ <input type="checkbox"/> Other Coordination by: _____ <input type="checkbox"/> Other Coordination by: _____ <input type="checkbox"/> Other Coordination by: _____		2. <input type="checkbox"/> Donations <input type="checkbox"/> Other (Explain) _____ <input type="checkbox"/> Requisitions <input type="checkbox"/> Procurement <input type="checkbox"/> Interagency Agreement <input checked="" type="checkbox"/> Mission Agreement	
3. Assigned to:  ESF/OFA <u>ESF-10</u> Other _____ Date/Time _____		3. Immediate Action Required <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
4. Date		5. Time Assigned	
6. Action Request ESF#		7. Assigned to	
<b>IV. STATEMENT OF WORK (Operations Section Only)</b>			
1. OFA Action Officer Dave Williams		2. 24 Hour Phone No. 913-551-7625	
3. FEMA Project Manager Christian M. Van Alstyne		4. 24 Hour Phone No. 816-728-3324	
5. Statement of Work Activate EPA to the JFO at a time directed by FEMA to perform duties of ESF #10. As directed by and in coordination with FEMA, EPA will conduct oil and hazardous materials field operations, including cleanup and disposal of hazardous materials and oil and response to orphaned containers. These necessary actions will mitigate actual and potential threats to public health and safety. EPA response may also include "monitoring of immediate public health and safety threats resulting from debris removal operations." EPA will coordinate activities involving contaminated debris with USACE as appropriate. Actions may include support by any special teams requested by the FOSC as well as special technical assets of all ESF #10 support agencies, in coordination with and approval by FEMA. Equipment purchases are not authorized under the Mission Assignment. MA Task Orders will be issued for specific personnel requirements, location(s), dates, and duration of assignment(s).			
6. Estimated Completion Date 09/30/2011		7. Cost Estimate 80,000.00	
<b>V. ACTION TAKEN (Operations Section Only)</b>			
<input type="checkbox"/> Accepted <input type="checkbox"/> Rejected <input type="checkbox"/> Requestor Notified			
Reason / Disposition			
<b>TRACKING INFORMATION (FEMA Use Only)</b>			
ECAPS/NEMIS Task ID:		Action Request No.	
Received by (Name and Organization)		State	
Program Code/Event No.		Date/Time Submitted	
		<input type="checkbox"/> Originated as verbal	



## 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. 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, and Paperwork Reduction Project (1660-0047). **NOTE: Do not send your completed form to this address.**

### INSTRUCTIONS

Items on the Action 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 Assistance Requested: 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 DFA or TA, 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, 206, 208.

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

Accept/Reject: Operations Section Chief accepts or rejects the request; provide reason if rejection. If request accepted, coordinates with others, i.e., LOG EST'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.; Logistics), or other organization.

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

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

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

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

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 61-I, 40-I, or MA, this goes in "Justification" tab in NEMIS.

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

Action Request Results: Ops Section Chief, MAM, 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-task agencies, contracts and other resources utilized.

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