## **Clackamas County Resource Request Form**

Use this form to submit resource requests to the Clackamas County EOC.

	Resource Information
Date/Time	110414
Requesting entity	Clackamas County
Contact person	Lane Miller
Phone	XXX-XXX-XXXX
Fax	XXX-XXX-XXXX
Email	XXXXXXXXXX
Billing address	XXXXXXXXX
Authorized by	Nancy Bush
Title	Emergency Management Director
Signature	XXXXXXXX
Request Details	
Mission/task to be accomplished	Move debris and snow off of right-of-way
Mission/task needed by	11/05/14
Assistance/resource requested (list specific size, type, capability, etc.)	924 H Loader equivalent
Location needed (list address)	Molalla Park, 29483 S. Molalla Ave., Molalla
Quantity	1
Duration of need	One Week
Special requirements	Integrated tool carrier- 2 yd bucket and snow blade, one orange light to identify maintenance vehicle
Onsite contact name	Doug Jones
Onsite contact phone number	XXXXXXX
Background Information	
Has requesting entity requested assistance from all available mutual aid partners? (Yes or No)	Yes
If yes, list partners/vendors contacted	Multnomah and Washington County, local vendors
*** For Clackamas County EOC Use Only ***	
Request received by	
Receipt date	
Receipt time	

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Use this form to submit resource requests to the Clackamas County EOC.

RESIDENCE PROPERTY.	Resource Information
Date/Time	
Requesting entity	
Contact person	
Phone	
Fax	
Email	
Billing address	
Authorized by	
Title	
Signature	
	Request Details
Mission/task to be accomplished	
Mission/task needed by	
Assistance/resource requested (list specific size, type, capability, etc.)	
Location needed (list address)	
Quantity	5 8 100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Duration of need	
Special requirements	
Onsite contact name	
Onsite contact phone number	
	Background Information
Has requesting entity requested assistance from all available mutual aid partners? (Yes or No)	
If yes, list partners/vendors contacted	
*** For Clackamas County EOC Use Only ***	
Request received by	
Receipt date	
Receipt time	

*** For Clackamas County EOC Use Only *** (cont'd)	
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Request Allocation Details	
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#### **INSTRUCTIONS**

The Resource Request Form is a user-friendly format for both the requesting (borrower) and responding (potential lender) agencies. It can also be used to request and track mutual aid requests. All parts of the form should be kept together as a package during processing.

Each request form is intended to service a single request to ensure appropriate details and resource tracking per the acquisition process.

All information fields MUST have data entered. List N/A in field if not applicable.

## Form - Request Details

#### Requesting Agency

#### **Contact Person**

Ensure contact information is accurate and that the contact person is available. The person identified is the person to contact if any questions about the resource request arise.

## Authorized by— REQUIRED before processing can begin

For all requests, it is important to clearly indicate who, under what authority, is requesting the resource or invoking mutual aid. It is a *person that can obligate funds for the jurisdiction.* For the Inter- and Intra-County Agreements, this would normally be one of the individuals on the Mutual Aid POC List. When operating in an ICS/EOC mode this could be the Logistics Section Chief or Command.

## Mission to be Accomplished

Assist the purchasing agent acting on your agency's behalf by adequately describing the mission or task to be accomplished.

#### **Mission Task Needed By**

**Do not insert "ASAP".** List a reasonable date and time that the purchasing agent can negotiate for you.

## Assistance/Resource(s) Requested

This is the field that describes as clearly as possible what is being requested. Using accepted industry/discipline descriptions will facilitate processing and minimize the need for clarification (e.g. NIMS TYPE 1 resources when applicable).

#### **Location Needed**

Emergency conditions may warrant notations included about alternate routes to site, etc. Be as specific as possible. Include location name and address.

#### **Duration of Need**

Note anticipated duration of need as of the time of request. Terms can always be re-negotiated at a later date as conditions warrant.

## **Special Requirements**

More detailed specifics can be provided in this section (e.g. certifications or credentials involving personnel requests; bulk supply grades for sand/gravel; equipment operators; etc.).

#### **Onsite Contact Name**

Name the person that will be EXPECTING the resource for check in and assignment. If signatory authority is required for acceptance of resource, make arrangements accordingly. It is always a good business practice to inspect equipment with vendor or partner prior to acceptance to avoid any possible conflicts at a later date.

## Has your agency requested assistance from all available mutual aid partners?

It is the County expectation that all mutual aid possibilities are exhausted prior to requesting County assistance in resource acquisition. Listing prior mutual aid partners and vendors contacted will expedite the County's queries on an agency's behalf by reducing duplicative efforts.

## **Clackamas County EOC**

#### **Received By**

This field serves to note the initial point of contact receiving the request.

#### **Resource Status Updates**

This field is used as an internal update log for status of the request. There will be a date/time/author signature for each log entry reflecting routing of request and activities to make resource acquisition.

#### Is this a mutual aid request?

It is important to know under what pre-established agreement, if any, the request is being made. Inter-(network of regional counties) and Intra-County (jurisdictions and agencies within Clackamas County) agreements are the most comprehensive and address all critical elements impacting mutual aid. Check yes if your agency is requesting to invoke mutual aid.

It's important to know if the Requestor is invoking the State mutual aid pact. This state pact is designed for non-reimbursable mutual aid. BEFORE providing any assistance or resource support under the state mutual aid pact, an additional, formal, approved agreement between the borrower and the lender must be completed if reimbursement is intended.

If no mutual aid agreement exists between the requestor and lender, liability, workers compensation, reimbursement and other key issues must be resolved prior to providing the requested assistance.

#### **Resource Allocations Details**

Entries at the bottom of the Request Details Section are logged by the acting acquisition agent and communicated to the receiving agency. The communication serves to substantiate the agreement of terms and conditions provided by the lender/contractor.

## **General Support Documentation Required**

Written and phone communication logs associated with negotiations to fill the resource request need to be attached to the request to document the activities and agreements.