

# RESOURCE REQUEST

**\*Denotes required field**

**\*Priority: Select One:**

<input type="checkbox"/> Black – Flash –	Causing death or serious injury; imminent threat of death or serious injury.
<input type="checkbox"/> Red – High –	Potential threat of death or serious injury; damaging/destroying/imminent threat of damage to property/environment.
<input type="checkbox"/> Yellow – Medium	Potential threat to property/environment
<input type="checkbox"/> Green – Low	Routine

**\*Status: Select One:**

- Black – New
- Purple – Ops Chief – For CEOC use only
- Red – Tasked to Section/Branch – For CEOC use only
- Orange – Sent to REOC – For CEOC use only
- Yellow – En Route – For CEOC use only
- Green – On Scene
- Teal – Demobilized/Completed
- Gray – Cancelled
- Blue - Closed

Tracking Number - Local

Tracking Number – State – CEOC Use Only

(Enter as: Jurisdiction or Agency – 6 number date (020511) - # of request) ((Example: Rosemead – 020511 – 3))

Tracking Number – FEMA – CEOC Use Only

Tracking Number – EMAC – CEOC Use Only

**WHO IS MAKING THE REQUEST?**

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Requesting Organization (Name of Jurisdiction/Agency)

**\*Requestor's Contact Info**

Name:	Phone:
Fax:	Pager:
Cell:	Other:

Related Event/Incident/Activity

**WHAT IS BEING REQUESTED?**

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Resource Category

**\*Quantity**

(Choose from: Animal Health, Emergency Management, EMS, Fire & Hazmat, Health & Medical, Law Enforcement, Public Works, Search & Rescue)

**\*Resource Type/Kind – Be as descriptive as possible**

Qty Unit Of Measure (Choose from: bottles, boxes, each, gallons, pallets, etc.)

When Needed: Date and Time

**\*Mission – Describe what the resource needs to do**

**Resource must come with:**

- Fuel    Meals    Operator(s)    Water    Maint    Lodging    Power

**Other**

**SPECIAL INSTRUCTIONS (E.G. SAFETY MESSAGE, INGRESS/EGRESS ROUTES, ETC.)**

**FORWARD REQUEST TO:**

**Individual: For CEOC Use Only**

**Organization/Location: - For new requests, send to CEOC Logistics**

**Position: For new requests, send to Logistics Section Chief**

**Agency: For CEOC Use Only**

**Vendor – For CEOC Use Only**

**Summary of actions taken – For CEOC Use Only**

**Estimated Resource Cost – FOR CEOC Use Only**