



Michael J. Tully
Fire Chief /EMD

North Hampton Fire & Rescue
235 Atlantic Avenue
North Hampton, NH 03862
603-964-5500

To: Alex Marinaccio

From: Chief Michael Tully

Subject: Seabrook Station supplemental budget proposal — 2021

Date: April 16, 2020

Attached are the documents which I believe provide details you need to support our proposal Seabrook Station budget proposal for the upcoming fiscal year. If you should find any issues or are missing any documents please let me know and I will correct the problem. Thank you again for all your assistance throughout the year.

Respectfully,

[Handwritten signature of Michael J. Tully]

Michael J. Tully
Fire Chief/EMD

This form can also be found on the HSEM Resource Center under REP:

<https://prd.blogs.nh.gov/dos/hsem/>

SEABROOK STATION EPZ – FY 2021 Supplementary Budget

(Must be submitted no later than 15 March 2020)

Name of Community: North Hampton _____ Date: 04/16/20 _____

Part I: Training Plan & Requests

(Training should reflect ONLY individuals from your municipality)

Name of Training	Date Anticipated	Number of Individuals	Hourly Rate (average)	\$\$ Request
Rep 7	11/1/20	14	50.55	1415.40
Rep 8	11/1/20	14	50.55	1415.40
IS-3	2/1/21	4	50.55	1011.00
Food & Supplies for Trainings	11/1/20			60.00
TOTAL REQUEST				3901.80

To be reimbursed for training expenses, course record with names of municipality's participants must be submitted in addition to invoice from appropriate community.

Part 2 – Drill & Exercise Participation

(Drills & Exercises should reflect expenses incurred ONLY individuals from your municipality)

Name of Activity	Date Anticipated	Number of Individuals	Hourly Rate (average)	\$\$ Request
TTX	1/2021	2	72.19	866.28
Workshop	10/2020	2	72.19	866.28
Evaluated	9/2020	18	50.55	5459.40
Food & Supplies				200.00
TOTAL REQUEST				7391.96

SS Exercise Cycle dates are provided by HSEM. If a municipality wishes to have an event and be reimbursed, prior approval from HSEM REP Planning must be obtained.

Part 3 – Equipment Requests

Equipment Requests are made for any single piece of equipment > \$2,500. Equipment purchases of \$2,500 or less per individual piece of equipment must come from the \$8,500 flat fee.

Name of Equipment	Use in REP	Percentage of Total Cost (if applicable)	\$\$ Request
TOTAL REQUEST			

Approval/Recommendation of Request:

M. Kelly
Municipal Representative (Approval)

4/16/20
Date

Field Representative (Recommendation)

Date