

EPZ Community Assessment Request Form : Entry # 20054

Community

South Hampton

Point of Contact Name:

Fred Kozacka

Point of Contact Phone:

Point of Contact Email:

Mailing Address:

128 Main Ave
South Hampton, New Hampshire 03827
United States
[Map It](#)

PART I: Training Plan and Requests

Number of Trainings to be entered

2

Name of Training

REP 3: RADEF Officer

Date Anticipated

05/01/2020

Number of Individuals

2

Amount Requested

\$250.00

Name of Training

REP 2: EOC Operations in REP

Date Anticipated

08/19/2020

Number of Individuals

10

Amount Requested

\$1,500.00

Training Plan & Requests Total

\$1,750.00

PART II: Drill and Exercise Participation

Number of Drills and Exercises

1

Name of Activity

Graded X

Date Anticipated

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09/01/2020

Number of Individuals Participating

10

Place of Exercise

South Hampton EOC

Amount Requested for Drill/Exercise

\$2,000.00

Drill & Exercise Total

\$2,000.00

Part III: Equipment Requests

List amount of equipment you are requesting

0

Equipment Total

\$0.00

Assessment Request Total Summary

Flat Rate request:

\$8,500.00

Part I: Training request:

\$1,750.00

Part II: Drills & Exercises request:

\$2,000.00

Part III: Equipment request:

\$0.00

Total

\$12,250.00

I certify that I am authorized to submit this request form on behalf of the town listed on the first page of the form. I also certify that the Emergency Management Director has reviewed and approved this submission.

- I Certify

Name of Person Submitting Form

Julia Chase

Title of Person Submitting Form

Senior Field Rep

Email

Notes



Submission Notification (ID: 54f5c816599b0)

added March 10, 2020 at 1:38 pm

WordPress successfully passed the notification email to the sending server.