Carter, Amy

From: NH HSEM <REP@dos.nh.gov>
Sent: Friday, May 14, 2021 8:04 AM
To: DOS: REP; DOS: NH HSEM Field Services; newtonnhemd@aol.com
Subject: Seabrook Station EPZ Supplementary Budget - Assessment Request - Newton

HOMELAND SECURITY EMERGENCY MANAGEMENT
NEW HAMPSHIRE DEPARTMENT OF SAFETY

Thank you for submitting your REP Assessment Request online. Below is a copy of the information that was submitted to HSEM. If you have any questions, please contact HSEM REP Planning at REP@dos.nh.gov.

Community
Newton
Point of Contact Name:
larry foote
Point of Contact Phone:
(978) 804-0529
Point of Contact Email:
newtonnhemd@aol.com
Mailing Address:
8 merrimac road newton, New Hampshire 03858 United States Map It
PART I: Training Plan and Requests
Number of Trainings to be entered
3
Name of Training
REP 2: EOC Operations in REP
Date Anticipated
09/08/2021
Number of Individuals

3

Amount Requested

$400.00

Name of Training

REP 3: RADEF Officer

Date Anticipated

10/06/2021

Number of Individuals

3

Amount Requested

$400.00

Name of Training

REP 1: Introduction to Radiological Emergency Preparedness in NH (Online)

Date Anticipated

05/31/2021

Number of Individuals

5

Amount Requested

$400.00

Training Plan & Requests Total

$1,200.00

PART II: Drill and Exercise Participation

Number of Drills and Exercises

5

Name of Activity

workshop

Date Anticipated

07/28/2021

Number of Individuals Participating

3

Place of Exercise

tbd

Amount Requested for Drill/Exercise

$800.00

Name of Activity

table top

Date Anticipated

09/18/2021

Number of Individuals Participating

3

Place of Exercise

tbd

Amount Requested for Drill/Exercise

$800.00

Name of Activity

cfe1

Date Anticipated

12/08/2021

Number of Individuals Participating

20

Place of Exercise

8 merrimac road

Amount Requested for Drill/Exercise

$5,900.00

Name of Activity

cfe 2

Date Anticipated

02/09/2022

Number of Individuals Participating

20

Place of Exercise

8 merrimac

Amount Requested for Drill/Exercise

$5,900.00

Name of Activity

graded

Date Anticipated

04/06/2022

Number of Individuals Participating

20

Place of Exercise

8 merrimac road

Amount Requested for Drill/Exercise

$5,900.00

Drill & Exercise Total

$19,300.00

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:

$1,200.00

Part II: Drills & Exercises request:

$19,300.00

Part III: Equipment request:

$0.00

Total request:

$29,000.00

Scope of Service

How would you like to provide the Scope of Service agreement?

Sign electronically

Name

larry foote

Date

05/14/2021

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
larry foote
Title of Person Submitting Form
emergency management director
Email
newtonnhemd@aol.com