Santa Clara County RACES Radio Routing Slip				
Radio Operator Only:	<sup>1</sup> Origin Msg #:	Destination Msg #:		

This Section to be Completed by Message Author/Cre				eator:			( <u>Underlined=Required</u> )	
² <u>D</u> a	<sup>2</sup> Date: <sup>3</sup> Time (24hr): <sup>4</sup> Handling: Olmmediate (ASA		nmediate (ASAP)	OPriority (<1 hr)	ORoutine (<2 hr)			
	5 <u>IC</u>	S Position:			F	<sup>9</sup> ICS Position:		
T 0	6 <u>L</u> (	ocation:				10 Location:		
	<sup>7</sup> N	lame:				<sup>11</sup> Name:		
	8 C	ontact Info:			M	12 Contact Info:		
Form: <sup>13</sup> Type:			<sup>14</sup> Topic:					

### **Instructions for Message Author/Creator:**

- 1. Complete section above, surrounded by BOLD line (see instructions on back)
- 2. Fill in all Required fields
- 3. Attach to the front of a form to be sent via radio
- 4. Deliver to radio operator for transmission

Radio Operator Only:						
Relay:	ay: Rcvd:			Sent:		
Name:		Call Sign:		Date:	Time (24hr):	



## County of Santa Clara

Emergency Operations Center (EOC)

# **Resource Request Form 213RR**

COMPLETED BY REQUESTOR									
1. Incider	nt Name		2. Date Initiated	d	3. Time Initiated	4. Tracking N (Completed b			
5. Reque	sted By (name,	agency, position, email, phone)		Hov	w to use the EOC F	orm 213RR			
			Purpose	The EOC 213RR is used to request non-mutual aid supplies, services, personnel, teams, equipment, utilities, fuel, facilities, or any other resource or incident management activity required from the Operational Area (OA.)					
			When to use	Period.	The Form 213RR may be used anytime during any Operational Period. If the OA EOC is not activated the Duty Officer will serve to coordinate the request.				
			Prepared by	Any EOC	any EOC position or agency requesting resources from the OA				
6. Prepared by (name, position, email, phone)		Approved by	Section Chief of the requesting EOC or Supervising Official at requesting agency						
			Routed to		Planning Section → Logistics Section → Finance/Admin Section → EOC Director → Logistics Section				
7. Approv	ved by (name, po	osition, email, phone)	Filed with		ogistics Section Resource Tracking Unit / Planning Section				
Signature:			User Notes	by the re	The Form 213RR is a two-sided form. Side one is completed by the requestor. Side two is completed by the OA EOC.  Please check that both sides are available.				
		F	REQUESTED RI	SOUR	E DETAILS				
	8. Qty/Unit 9. Resource Description (kin		nd/type, if applicable	10. 4	Arrival (date/time)	11. Priority	12. Est'd Cost		
						Now O High (0-4 hours)			
Section						Medium (5-12 hours)	1		
4.5						Low (12+ hours)	)		
cy / EOC	13. Deliver to (name, agency, position, email, phone)			14.	14. Location (address or lat./long., site type)				
Requesting Agency / EOC	15. Substitute/Suggested Sources (name, phone, website)								
quest	16. Supplemental Requirements (include details in #17)			17.	17. Special Instructions				
Re	O Equipment Operator O Lodg		ging						
		er							
	O Water								



## County of Santa Clara Emergency Operations Center (EOC)

# **Resource Request Form 213RR**

	COMPLETED BY OA EOC or DUTY OFFICE	₹
OA EOC <b>Plan/Intel</b> Section	18. Plan/Intel Section Remarks/Comments (include general description of request)  19. Plan/Intel Section Chief Approval (print and sign)	
	20. Order Placed By (name, position, agency, phone, radio, email)	
ics in	21. Method of Procurement (filled-in house, agreement, purchase, etc.)  22. Supplier Name / Point-of-Contact Information (name, address, phone, fax, email)	
OA EOC  Logistics Section	23. Logistics Section Remarks	
	24. Logistics Section Chief Approval (print and sign)	
OA EOC <b>Fin/Admin</b> Section	25. Finance/Admin Remarks	Date/Time
OA EOC Logistics Section	26. Logistics Section Final/Demobilization Remarks	Date/Time