Resource Manager Web Equipment Entry Form

(Fields proceeded by an asterisk (*) are required fields)

EQUIPMENT TAB INFORMATION *Organization Name *Equipment ID Code (Lic. Plate #, last 4 of VIN, patrol #, etc.) *Item Name Year/Make/Model NIMS Type (If applicable) **Status (Available, Assigned, Out of Service)** Deployable? Y/N

Rate/Unit of Measure (\$ per hour, mile, etc.)

FEMA Cost Code (If applicable)

For FEMA cost codes and rate list, please go to http://www.fema.gov/schedule-equipment-rates

QUALIFICATION TAB INFORMATION

For information on Federal Qualifications, please go to http://www.fema.gov/resource-management

| Qualification Code | Description |
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| LOCATION TAB INFORMATION | |
| Address 1 | |
| Address 2 | |
| | |
| City | State Zip Code |
| Contact 1 First Name | Contact 2 First Name |
| | |
| Contact 1 Last Name | Contact 2 Last Name |
| Contact 4 Phone | Contact 2 Phana |
| Contact 1 Phone | Contact 2 Phone |