

## **Mutual Aid and Assistance Responders Accommodations Checklist**

**Note:** It must be recognized by all parties involved that accommodations in emergency mutual aid and assistance situations are highly variable and subject to change. Information on this form is provided in good faith and is non-binding. Responders should be as prepared as possible for self-sufficiency and changes in conditions.

**Requestor Location / Utility:** \_\_\_\_\_ **Incident:** \_\_\_\_\_

**Comments:**

**Access**

Staging or reporting location: \_\_\_\_\_

Recommended route into area: \_\_\_\_\_

An escort from the requestor will be necessary in order for responders to clear access check-points and reach the requestor:

Yes \_\_\_\_ No \_\_\_\_

The requestor will be able to provide that escort:

Yes \_\_\_\_ No \_\_\_\_

Comments: \_\_\_\_\_

Special documentation or credentials will be required in order for the responders to clear access check-points: Yes \_\_\_\_ No \_\_\_\_

Explain: \_\_\_\_\_

Curfews are in place: Yes \_\_\_\_ No \_\_\_\_

Explain: \_\_\_\_\_

Most street signs are in place: Yes \_\_\_\_ No \_\_\_\_

Requestor will be able to provide local maps: Yes \_\_\_\_ No \_\_\_\_

Requestor will be able to provide GPS coordinates: Yes \_\_\_\_ No \_\_\_\_

Requestor will be able to provide GPS units: Yes \_\_\_\_ No \_\_\_\_

**Housing and Sanitation**

Normal hotel / motel accommodations available:

Yes \_\_\_\_\_ No \_\_\_\_\_

To be arranged by: Requestor \_\_\_\_\_ Utility name: \_\_\_\_\_

Responder \_\_\_\_\_

To be paid for by: Requestor \_\_\_\_\_ Utility name: \_\_\_\_\_

Responder \_\_\_\_\_

Approximate distance from work location: \_\_\_\_\_ miles

Comments:

Temporary shelter provided by requestor or other assisting agencies:

Yes \_\_\_\_\_ No \_\_\_\_\_ Agency name: \_\_\_\_\_

Restrooms: Yes \_\_\_\_\_ No \_\_\_\_\_

Portable toilets: Yes \_\_\_\_\_ No \_\_\_\_\_

Showers: Yes \_\_\_\_\_ No \_\_\_\_\_

Beds or cots: Yes \_\_\_\_\_ No \_\_\_\_\_

Bedding provided: Yes \_\_\_\_\_ No \_\_\_\_\_

Climate controlled: Yes \_\_\_\_\_ No \_\_\_\_\_

Location: \_\_\_\_\_

Distance to staging area: \_\_\_\_\_

Distance to work location: \_\_\_\_\_

Comments:

Shelter (tents , campers, etc.) must be provided by responder:

Yes \_\_\_\_\_ No \_\_\_\_\_

Location provided: Yes \_\_\_\_\_ No \_\_\_\_\_

Hook-ups available: Water \_\_\_\_\_ Elect \_\_\_\_\_ Sewer \_\_\_\_\_

Sewer dump location available: Yes \_\_\_\_\_ No \_\_\_\_\_

Restrooms: Yes \_\_\_\_\_ No \_\_\_\_\_

Portable toilets: Yes \_\_\_\_\_ No \_\_\_\_\_

Showers: Yes \_\_\_\_\_ No \_\_\_\_\_

Portable generators permitted: Yes \_\_\_\_\_ No \_\_\_\_\_

Gasoline \_\_\_\_\_ Diesel fuel \_\_\_\_\_ available for generators

Comments:

Sanitation facilities at work location:

Restrooms with running water nearby: Yes \_\_\_\_\_ No \_\_\_\_\_

Portable toilets: Yes \_\_\_\_\_ No \_\_\_\_\_

Comments:

Expected temperature range (F): \_\_\_\_\_ Five-day weather forecast: \_\_\_\_\_

Long-range forecast: \_\_\_\_\_

Other housing and sanitation comments:

**Food and Water**

Restaurants available: Yes \_\_\_\_\_ No \_\_\_\_\_  
Meals to be financially arranged by: Requestor \_\_\_\_\_ Responsible utility:  
\_\_\_\_\_ Responder \_\_\_\_\_  
Approximate distance from work location: \_\_\_\_\_ miles  
Comments:

Meals provided by requestor: Yes \_\_\_\_\_ No \_\_\_\_\_  
Provider name: \_\_\_\_\_  
Comments:

Grocery stores open and stocked: Yes \_\_\_\_\_ No \_\_\_\_\_  
Distance from work location: \_\_\_\_\_ miles  
Open with limited stock: \_\_\_\_\_  
Distance from work location: \_\_\_\_\_ miles  
Comments:

Food must be provided by responders: \_\_\_\_\_  
Refrigeration available: Yes \_\_\_\_\_ No \_\_\_\_\_  
Cooking facilities available: Yes \_\_\_\_\_ No \_\_\_\_\_  
Ice available: Yes \_\_\_\_\_ No \_\_\_\_\_  
    Provided by requestor: Yes \_\_\_\_\_ No \_\_\_\_\_  
    Available for purchase: Yes \_\_\_\_\_ No \_\_\_\_\_  
Comments:

Running water available for drinking, bathing, etc.: Yes \_\_\_\_\_ No \_\_\_\_\_  
Running water available for bathing, etc., only: Yes \_\_\_\_\_ No \_\_\_\_\_  
Bottled water available: Yes \_\_\_\_\_ No \_\_\_\_\_  
    Provided by requestor \_\_\_\_\_ Available for purchase \_\_\_\_\_  
No water available -- all water must be brought by responders \_\_\_\_\_  
Comments:

Other food and water comments:

**Employee Safety:**

First aid services available: Yes \_\_\_\_\_ No \_\_\_\_\_  
Paramedic / EMT services available: Yes \_\_\_\_\_ No \_\_\_\_\_  
Trauma services available: Yes \_\_\_\_\_ No \_\_\_\_\_  
Hospital services available: Yes \_\_\_\_\_ No \_\_\_\_\_  
Comments:

**Employee Safety (cont.):**

Current inoculations required of responders:

Tetanus \_\_\_\_\_  
Hep A \_\_\_\_\_  
Hep B \_\_\_\_\_  
Others: \_\_\_\_\_

**\*Basic PPE always required of all responders\***

Basic PPE: hard hat, safety vest, safety shoes, appropriate boots,  
appropriate gloves, raingear and eye and ear protection as needed  
Chain saw operator PPE: add chaps

Special PPE recommended or required: \_\_\_\_\_

Other potential exposures or conditions: \_\_\_\_\_

Animal or insect hazards or nuisances present: \_\_\_\_\_

Injury reporting procedure: \_\_\_\_\_

Comments:

Psychological conditions anticipated:

Routine storm damage \_\_\_\_\_  
Significant damage to properties \_\_\_\_\_  
Significant loss of livestock \_\_\_\_\_  
Significant loss of companion animals \_\_\_\_\_  
Significant loss of life and/or human suffering \_\_\_\_\_  
Finding of human corpses possible \_\_\_\_\_ probable \_\_\_\_\_  
Psychological counseling provided: Yes \_\_\_\_\_ No \_\_\_\_\_

Comments:

**Communications:**

Voice Communications:

Normal telephone service available: Yes \_\_\_\_\_ No \_\_\_\_\_  
Phones available: \_\_\_\_\_ Pay phones available: Yes \_\_\_\_\_ No \_\_\_\_\_  
Cell phones operable: Yes \_\_\_\_\_ No \_\_\_\_\_ Limited coverage \_\_\_\_\_  
Satellite telephones provided: Yes \_\_\_\_\_ No \_\_\_\_\_  
Requestor will be able to provide responder teams with one two-way radio per  
team: Yes \_\_\_\_\_ No \_\_\_\_\_  
Radio frequency used: \_\_\_\_\_  
Comments:

Data Communications:

Wired or wireless high-speed Internet access available: Yes \_\_\_\_\_ No \_\_\_\_\_  
Dial-up Internet access available: Yes \_\_\_\_\_ No \_\_\_\_\_

**Vehicular and Equipment Needs:**

Requestors will provide or ensure availability of vehicle diesel fuel and gasoline

Utility name: \_\_\_\_\_

Available for purchase \_\_\_\_\_

Responders must bring own diesel fuel \_\_\_\_\_ and gasoline \_\_\_\_\_

In disasters involving structural debris on roadways:

Requestors will provide or ensure availability of tire repair services:

Yes \_\_\_\_\_ No \_\_\_\_\_

Utility name: \_\_\_\_\_

Commercially available at charge \_\_\_\_\_

Responders must bring own tire repair capabilities: Yes \_\_\_\_\_ No \_\_\_\_\_

Chain saw parts and repair services available: Yes \_\_\_\_\_ No \_\_\_\_\_

Provided by (agency name): \_\_\_\_\_

Commercially available at charge: Yes \_\_\_\_\_ No \_\_\_\_\_

Must be provided by responders: Yes \_\_\_\_\_ No \_\_\_\_\_

Comments:

Vehicle and heavy equipment services

Provided by requestor: Yes \_\_\_\_\_ No \_\_\_\_\_

Commercially available: Yes \_\_\_\_\_ No \_\_\_\_\_

Responders must bring own vehicle and heavy equipment repair capabilities: \_\_\_\_\_

Local businesses of relevance to responders that are not open:

**Other Responders' Needs**

Financial:

Banks open: Yes \_\_\_\_\_ No \_\_\_\_\_

Bank teller machines operational: Yes \_\_\_\_\_ No \_\_\_\_\_

Credit cards OK at most business establishments: Yes \_\_\_\_\_ No \_\_\_\_\_

Responders purchase orders likely accepted: Yes \_\_\_\_\_ No \_\_\_\_\_

Travelers' checks accepted: Yes \_\_\_\_\_ No \_\_\_\_\_

Cash required: Yes \_\_\_\_\_ No \_\_\_\_\_ Suggested amount: \_\_\_\_\_

Notable cash-related security issues, if any: \_\_\_\_\_

Coins needed for laundry machines, vending machines, etc. Yes \_\_\_\_\_ No \_\_\_\_\_

Comments:

**Other Responders' Needs (cont.)**

Laundry services available: Yes \_\_\_\_\_ No \_\_\_\_\_  
Provided by requestor \_\_\_\_\_ Coin laundry services available \_\_\_\_\_  
Comments:

Other comments:

**Form Completed By:**      **Name:** \_\_\_\_\_  
**Signature:** \_\_\_\_\_  
**Title / Role:** \_\_\_\_\_  
**Agency:** \_\_\_\_\_  
**Date:** \_\_\_\_\_