# EMAT Deployment Request - Form A

The Requesting Agency should complete Part A but this may also be completed remotely by NEMA Duty Team in support of the Requesting Agency if required. **Please complete this form to the best of your ability, however the questions A1-A8 are the only mandatory fields.**

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| --- | --- | --- |
| **Ref** | **Descriptor** | **Comments** |
| **A1** | **Time / Date:** | 25/06/2021 11:55 am |
| **A2** | **To:**  | NEMA Duty Officer,  |
| **A3** | **Copy to:** | Requesting Agency / Group ECC / EOC / ICP as appropriate, relevant NEMA REMA  |
| **A4** | **Emergency type**  | Choose an item.  | Click or tap here to enter text. |
| **A5** | **Requesting agency** | Choose an item. | Click or tap here to enter text. |
| **A6** | **EMAT technical expertise required** | Select from list below or select other and used text box and enter detail[ ] Alternate Controller[ ] Recovery [ ] Public Information [ ] Welfare [ ] Planning[ ] Logistics[ ] Intelligence[ ] Operational Support and Logistics[ ] OtherClick or tap here to enter text. |
| **A7** | **Deployable Coordination Centre required** | Click or tap here to enter text. |
| **A8** | **Location EMAT requested to be operational** | Click or tap here to enter text. |
| *Insert google GPS hyper link if possible:* |

|  |  |  |
| --- | --- | --- |
| **A9** | **Declaration status** | Local Choose an item. |
| Regional Choose an item. |
| National Choose an item. |
| **A10** | **Local EOC status** | Choose an item. |
| Additional detail on other EOCs activated:Click or tap here to enter text. |
| **A11** | **Group ECC status**  | Choose an item. |
| **A12** | **Deployed NEMA Staff** | Click or tap here to enter text. |
| **A13** | **Date Time EMAT required to be operational**  | Click or tap to enter a date. |
| Time:  |
| **A14** | **Anticipated duration of support required**  | Click or tap here to enter text. |
| **A15** | **Reason for requesting EMAT assistance**  | Click or tap here to enter text. |
| **A16** | **Self-sufficiency required for team members** | Click or tap here to enter text. |
| **A17** | **Anticipated incident development** | Click or tap here to enter text. |
| **A18** | **Incident resource constraints** | Click or tap here to enter text. |
| **A19** | **Operational hazards** | Click or tap here to enter text. |
| **A20** | **Additional information** | Click or tap here to enter text. |
| **A21** | **Local contact in Requesting Agency** | Click or tap here to enter text. |
| **A22** | **Authorised by:** | Name: Click or tap here to enter text.Response role: Click or tap here to enter text. |