

RESOURCE REQUEST MESSAGE (ICS 213 RR)

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|---|---|---------------------|---|---|--------------------------------------|-------------|
| 1. Incident Name: | | 2. Date/Time | | 3. Resource Request Number: | | |
| Requestor | 4. Order (Use additional forms when requesting different resource sources of supply.): | | | | | |
| | Qty. | Kind | Type | Detailed Item Description: (Vital characteristics, brand, specs, experience, size, etc.) | Arrival Date and Time | Cost |
| | | | | | Requested | Estimated |
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| 5. Requested Delivery/Reporting Location: | | | | | | |
| 6. Suitable Substitutes and/or Suggested Sources: | | | | | | |
| 7. Requested by Name/Position: | | | 8. Priority: <input type="checkbox"/> Urgent <input type="checkbox"/> Routine <input type="checkbox"/> Low | | 9. Section Chief Approval: | |
| Logistics | 10. Logistics Order Number: | | | | 11. Supplier Phone/Fax/Email: | |
| | 12. Name of Supplier/POC: | | | | | |
| | 13. Notes: | | | | | |
| | 14. Approval Signature of Auth Logistics Rep: | | | | 15. Date/Time: | |
| 16. Order placed by (check box): <input type="checkbox"/> SPUL <input type="checkbox"/> PROC | | | | | | |
| Finance | 17. Reply/Comments from Finance: | | | | | |
| | 18. Finance Section Signature: | | | | 19. Date/Time: | |
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