

**MUTUAL AID INFORMATION FORM 2
REQUESTING AGENCY**

Date/Time:

Requesting Agency:

Name/Title Contact:

Phone Number/Fax Number:

Type of Emergency:

Estimated Duration Assistance will be required:

Assistance Requested (be as specific as possible)

Technical Assistance (for damage assessment, etc)

Equipment (for debris management operations, traffic control, communications, power, etc.)

Materials (shoring, lumber, rock etc)