

SEABROOK STATION EPZ – FY 2017 Supplementary Budgets

(Must be submitted no later than 15 March 2016)

Name of Community: Town of Brentwood Date: March 23, 2016

Part I: Training Plan & Requests

(Training should reflect ONLY individuals from your municipality)

Name of Training	Date Anticipated	Number of Individuals	Place of Training	\$\$ Request
IS-3 Radiological Emergency Management	TBD	3	Brentwood Fire Dept.	450.00
Food & Supplies for Trainings				
TOTAL REQUEST				\$450.00

To be reimbursed for training expenses, course record with names of municipality's participants must be submitted in addition to invoice from appropriate community.

Training Programs Eligible for REP reimbursement:

REP 101 – INTRODUCTION TO REP (covers notification, protective action process, radiation concepts, radiological exposure control, EOC Operations and operation of public alert system.

SPECIALIZED TRAINING ON PROCEDURES.

RADEF TRAINING – Issuance of dosimetry and procedures for Radef Officer.

EMI INDEPENDENT STUDY:

- IS-3 Radiological Emergency Management (Max. 5 hours)
- IS-301 Radiological Emergency Response (Max. 6 hours)
- IS-331 Introduction to Radiological Emergency Preparedness Exercise Evaluation (Max. 10 hours)

Special REP Courses offered through HSEM are also eligible. Please check with your Field Rep. or with Tech Hazards if you are unsure of reimbursement eligibility.



Part 2 – Drill & Exercise Participation

(Drills & Exercises should reflect expenses incurred ONLY individuals from your municipality)

Name of Activity	Date Anticipated	Number of Individuals	Place of Exercise	\$\$ Request
Seabrook Workshop	TBD	2	TBD	\$300.00
Seabrook TTX	TBD	2	TBD	\$300.00
Food & Supplies for Drills/Exerc.				
TOTAL REQUEST				\$600.00

Drills, exercises and workshop dates for the SS Exercise Cycles are provided by HSEM. If a municipality wishes to have an event separate from the published dates and be reimbursed, prior approval from HSEM Tech Hazards must be obtained.

Part 3 – Equipment Requests

Equipment Requests are made for any single piece of equipment > \$2,500. Equipment purchases of \$2,500 or less per individual piece of equipment must come from the \$8,500 flat fee.

Name of Equipment	Use in REP	Percentage of Total Cost (if applicable)	\$\$ Request
TOTAL REQUEST			

Approval/Recommendation of Request:

___ Rich Murphy (EMD) _____

___ March 23, 2016 _____

Municipal Representative (Approval)

Date

___ Heidi Lawton _____

___ March 23, 2016 _____

Field Representative (Recommendation)

Date