

# Palmetto Resource Request Form V2A

\* INDICATES A REQUIRED FIELD

1.	Incident Name*
2.	<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;">                 Detailed Description*                  See Example:             </div> <div style="border: 1px solid black; padding: 5px; width: 35%;">                 WHAT RESOURCE ARE YOU REQUESTING AND WHEN DO YOU NEED IT (ASAP IS NOT A GOOD ANSWER) ALSO ESTIMATE HOW LONG YOU WILL NEED THE RESOURCE             </div> </div>
↓	
Example: <i>Anywhere County requests 5 pallets of drinking water no later than 3:00 p.m., December 25<sup>th</sup> to support shelter operations as a result of localized flooding. Shelter site has loading dock and material handling equipment.</i>	
→ PAUSE HERE AND WAIT FOR THE STATE EOC RADIO OPERATOR TO TELL YOU TO CONTINUE	
3.	County Name Requesting this Resource * <span style="float: right; border: 1px solid black; padding: 2px;">COUNTY NAME OR SCEMD</span>
4.	Delivery Point of Contact NAME* <span style="float: right; border: 1px solid black; padding: 2px;">PERSONS NAME AT THE DELIVERY ADDRESS</span>
5.	Delivery Point of contact PHONE*
6.	Deliver to Street Address*
7.	Deliver to City, State & ZIP*
<div style="border: 1px solid black; padding: 5px; display: inline-block;">                     The following field, REQUESTOR NAME should never be the radio operator                 </div>	
8.	Requestor Name*
9.	Requestor Phone AND Email Address*
10.	Palmetto Resource Request Number <span style="float: right; border: 1px solid black; padding: 2px;">THIS WILL BE PROVIDED TO YOU BY THE STATE EOC RADIO OPERATOR</span>
Document name: Palmetto Resource Request Form Updated by South Carolina A.R.E.S. Approved by: S.C. E.M.D. Date 6/8/2023 Version V2A	

## Palmetto Resource Request Form

**Purpose:** This resource request is used to order resources from the Palmetto system. This form is a custom form for South Carolina use only.

**Preparation:** This form is filled out by the location requiring the resources. All required fields must be complete.

**Approval:** The location requiring the resource has an authorized approver. It is this person that grants approval to send this form. The radio operator can not give approval. Only the county Emergency Manager can grant approval to forward this onto the State EOC.

**Distribution:** The completed form is sent from the location requiring the resource to the county EOC for fulfillment. At no time should the location requiring the resource bypass their county EOC and send directly to the State EOC unless instructed to do so.

Line Title	Instructions
Incident Name *	Name of exercise or incident
Detailed Description *	Describe the resource you need, cots, bottled water, blankets. Read the example. And estimate how long you will need the resource for, especially for human resources.
County Name Requesting this Resource *	The name of the county requesting the resource or SCEMD
Delivery Point of Contact NAME *	The name of who to deliver this request to
Delivery Point of Contact PHONE *	Phone number for delivery contact person
Deliver to Street Address*	Street address where this is being delivered to
Deliver to City, State & ZIP	City, State and ZIP where this is being delivered to
Requestor NAME *	Name of person who has the authority to make this request
Requestor PHONE and EMAIL Address*	Phone number and email address of the requestor
Palmetto Resource Request Number	This is provided by the State EOC radio operator after it has been entered into the system.
* Indicates a required field	