DONATED EQUIPMENT WEEKLY SUMMARY FORM



Consolidated by Eligible Work Performed

EVENT (FEMA Disaster Number)					PARISH							PAGE of		
VOLUNTEER + DONATED RESOURCES COORDINATOR (VDRC)					CONTACT PHONE #						CONTACT EMAIL			
LOCATION / SITE ADDRESS					PERIOD COVERING						ТО			
ORGANIZATION CONTACT					CONTACT PHONE #						CONTACT EMAIL			
DESCRIPTION OF ELIGIBLE WORK PERFORMED											1			
TYPE OF EQUIPMENT	DATES + HOURS USED EA					ACH DAY	,							
(INDICATE SIZE + CAPACITY + HORSEPOWER + MAKE AND MODEL AS APPROPRIATE)	EQUIPMENT CODE NUMBER*	OPERATOR'S NAME	DAY	М	Т	W	Т	F	S	S	TOTAL HOURS	EQUIPMENT RATE*	TOTAL COSTS	
			HOURS									\$	\$	
			HOURS								LAND	\$ 000	\$	
			HOURS						Ž		STRION	\$	\$	
			HOURS						ICE		Garana	\$	\$ 8	
			HOURS						140			\$	\$ 120	
			HOURS								CON	FIDENCE	\$	
			HOURS								109	\$ 883	\$	
NOTE: * Equipment code numbers and equipment rates can be found at:									TOTAL				\$	

NOTE: * Equipment code numbers and equipment rates can be found at: https://www.fema.gov/media-librarydata/1504646556623-5df6d34cb30e72f6821337472903d310/2017_FEMA_ Schedule_of_Equipment_Rates_508_FINAL.pdf





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Consolidated by Eligible Work Performed

HOW TO COMPLETE THIS FORM

- **Event:** Enter the FEMA Disaster Number.
- **Parish:** Enter Parish where volunteer work was performed.
- Page of : Enter page number of current page and pages of entire document.
- Volunteer and Donated Resources Coordinator (VDRC): Enter the name of the VDRC who will be receiving this data form from the Organization Contact.
- Contact Phone #: Enter phone # of VDRC.
- Contact Email: Enter email address of VDRC.
- **Location/Site Address:** Enter the address where volunteer work was performed.
- Period Covering _ to _: Enter period of time covered on this data form.
- Organization Contact: Enter name of the Volunteer Organization Contact that is collecting the data for this form.
- Contact Phone #: Enter phone # of Organization Contact.
- Contact Email: Enter email address of Organization Contact.

- Description of Eligible Work Performed: Enter a specific description of work performed eligible work performed.
- **Type of Equipment:** Enter size, capacity, horsepower, make and model of equipment used.
- Equipment Code Number: Enter equipment code number.
- **Operator's Name:** Enter name of equipment operator.
- **Dates + Hours Used Each Day:** Enter hours used on designated day, Monday through Sunday.
- **Total Hours:** Enter total number of hours equipment was used throughout the designated week.
- **Equipment Rate:** Enter equipment rate designated by FEMA or the Subrecipient (Applicant) equipment rate, whichever is lower and reflects all costs associated with operating the equipment.
- **Total Costs:** Enter total costs by multiplying equipment rate by total hours used.
- **Total:** Enter total by adding all total costs together.

EXAMPLES OF INELIGIBLE ACTIVITIES + DONATIONS

• Debris removal on private property **EXCEPT** if *Private Property Debris Removal* (PPDR) **policy is approved by the Federal Coordinating Office** (FCO) **for the disaster in the designated area**.

[SOURCEs: FEMA Donated Resources Criteria for Public Assistance + 44 CFR 13.24]

If in doubt about eligible activities and/or donations, document anyway. It is better to over document rather than under.

EXAMPLES OF ELIGIBLE ACTIVITIES + DONATIONS

- Donating equipment to raise or reinforce a levee.
- Donating equipment to clear Parish or City road right-ofway debris.
- Donating chainsaws to cut fallen trees blocking a public hospital drive.
- Donated equipment may also be Subrecipient- (Applicant-) owned equipment – called Force Account Equipment or FAE.
- It may include permanently mounted generators – based on hourly equipment rates or may be based on mileage for vehicles if the mileage is documented and is less costly than hourly rates.

[SOURCEs: FEMA Donated Resources Criteria for Public Assistance + 44 CFR 13.24 + FEMA Public Assistance Program and Policy Guide (PAPPG) FP 104-009-2 / April 2017, pages 26-29 and 36-37]