

# Santa Clara County RACES -- Radio Routing Slip

Rev: 190511

Radio Operator Only:	<sup>1</sup> Origin Msg #: <b>MPP-016</b>	Destination Msg #:
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<b>This Section to be Completed by Message Author/Creator:</b>		<b>(Underlined&gt;=Required)</b>	
<sup>2</sup> <u>Date:</u> <b>05/21/19</b>	<sup>3</sup> <u>Time</u> (24hr): <b>2100</b>	<sup>4</sup> <u>Handling:</u> <input type="radio"/> Immediate (ASAP) <input checked="" type="radio"/> <b>Priority</b> (<1 hr) <input type="radio"/> Routine (<2 hr)	
<b>T O</b>	<sup>5</sup> <u>ICS Position:</u> <b>Planning</b>	<b>F R O M</b>	<sup>9</sup> <u>ICS Position:</u> <b>Staging Manager</b>
	<sup>6</sup> <u>Location:</u> <b>XNDEOC</b>		<sup>10</sup> <u>Location:</u> <b>1st Street Staging</b>
	<sup>7</sup> <u>Name:</u>		<sup>11</sup> <u>Name:</u>
	<sup>8</sup> <u>Contact Info:</u>		<sup>12</sup> <u>Contact Info:</u>
<sup>13</sup> <u>Form Type/Main Topic:</u> <b>213RR / Fuel Order</b>			

**Instructions for Message Author/Creator:**

1. Complete section above, surrounded by BOLD line (see instructions on back)
2. Fill in all Required fields
3. Attach to the front of a form to be sent via radio
4. Deliver to radio operator for transmission

<b>Radio Operator Only:</b>				
<b>Relay:</b>	Rcvd Msg From:	Sent Msg To:	Rcvd Ack From:	Sent Ack To:
<b>Name:</b>	<b>Call Sign:</b>		<b>Date:</b>	<b>Time (24hr):</b>

## Instructions: Radio Routing Slip

**Purpose:** The SCCo RACES Radio Routing Slip is used to add the necessary radio handling information to an existing form that does not already have these fields.

### Instructions for Message Authors/Creators:

Field	Instructions
<b>Date</b>	<u>Required.</u> Enter the date created.
<b>Time</b>	<u>Required.</u> Enter the time created. Use 24-hour time.
<b>Handling</b>	<u>Required.</u> Select one. Messages are sent in priority order and as soon as possible. Indicated times are approximate maximum wait times if radio net is busy.
<b>TO / FROM</b>	
<b>ICS Position</b>	<u>Required.</u> Enter the ICS position name.
<b>Location</b>	<u>Required.</u> Enter the location (such as name of EOC, hospital, base, command post, shelter, ...).
<b>Name</b>	<u>Optional.</u> Enter only if the message is to a specific individual.
<b>Contact Info</b>	<u>Optional.</u> Enter a phone number, frequency or other info that may help reach the sender/recipient.
<b>Form Type/Topic</b>	<u>Required.</u> Enter the type of the attached form and, if appropriate, the main topic/subject of the form. This will aid in matching the associated form if this routing slip becomes separated. Examples: "213RR / Barricades" or "Municipal Status / San Jose"

### Instructions for Radio Operators:

**Important:** Write the Origin message number on the top right of the form, in case it becomes separated. Staple this routing slip to the front of the form being handled. Fields are numbered in the order they should be sent over the air.

Field	Instructions
<b>Origin Msg #</b>	<u>Required.</u> Enter the message number of the original sending station.
<b>Destination Msg #</b>	<u>Required.</u> Enter the message number of the ultimate destination station.
<b>Relay</b>	When relaying: Enter a call sign or check mark. Strike through field if not appropriate.
<b>Name</b>	<u>Required.</u> Enter the first initial and last name of the radio operator that handled the message.
<b>Call Sign</b>	<u>Required.</u> Enter the call sign of the radio operator that handled the message.
<b>Date</b>	<u>Required.</u> Enter the date the message was sent/received.
<b>Time</b>	<u>Required.</u> Enter the time the message was sent/received. Use 24-hour time.



County of Santa Clara  
Emergency Operations Center (EOC)  
**Resource Request Form 213RR**

MPP-016

**COMPLETED BY REQUESTOR**

<b>1. Incident Name</b>	<b>2. Date Initiated</b>	<b>3. Time Initiated</b>	<b>4. Tracking Number</b> <i>(Completed by OA EOC)</i>
Message Passing Practice Net	05/21/2019	2100	
<b>5. Requested By</b> <i>(name, agency, position, email, phone)</i> Pat Patterson SCC Roads and Airports 408-555-9876		<b>How to use the EOC Form 213RR</b>	
<b>6. Prepared by</b> <i>(name, position, email, phone)</i> Pat Patterson Staging Manager 408-555-9876		<b>Purpose</b> The EOC 213RR is used to request non-mutual aid supplies, services, personnel, teams, equipment, utilities, fuel, facilities, or any other resource or incident management activity required from the Operational Area (OA.)	
<b>7. Approved by</b> <i>(name, position, email, phone)</i> John Donovan Asst. Director 408-555-1590 Signature:		<b>When to use</b> The Form 213RR may be used anytime during any Operational Period. If the OA EOC is not activated the Duty Officer will serve to coordinate the request.	
		<b>Prepared by</b> Any EOC position or agency requesting resources from the OA	
		<b>Approved by</b> Section Chief of the requesting EOC or Supervising Official at requesting agency	
		<b>Routed to</b> Planning Section → Logistics Section → Finance/Admin Section → EOC Director → Logistics Section	
		<b>Filed with</b> Logistics Section Resource Tracking Unit / Planning Section Documentation Unit	
		<b>User Notes</b> The Form 213RR is a two-sided form. Side one is completed by the requestor. Side two is completed by the OA EOC. <b>Please check that both sides are available.</b>	

**REQUESTED RESOURCE DETAILS**

	8. Qty/Unit	9. Resource Description <i>(kind/type, if applicable)</i>	10. Arrival <i>(date/time)</i>	11. Priority	12. Est'd Cost
<b>Requesting Agency / EOC Section</b>	500 Gallons	Diesel Fuel	05/22/2019 0900	Now <input type="radio"/> High (0-4 hours) <input type="radio"/> Medium (5-12 hours) <input checked="" type="radio"/> Low (12+ hours) <input type="radio"/>	1500
	<b>13. Deliver to</b> <i>(name, agency, position, email, phone)</i> Staging Mgr, 1st Street Staging			<b>14. Location</b> <i>(address or lat./long., site type)</i> 5555 N. 1st Street	
	<b>15. Substitute/Suggested Sources</b> <i>(name, phone, website)</i>				
	<b>16. Supplemental Requirements</b> <i>(include details in #17)</i>			<b>17. Special Instructions</b>	
<input type="radio"/> Equipment Operator <input type="radio"/> Lodging <input checked="" type="radio"/> Fuel <input type="radio"/> Power Fuel Type <u>Type 2 Diesel</u> <input type="radio"/> Maintenance <input type="radio"/> Meals <input type="radio"/> Other _____ <input type="radio"/> Water			Gate code is 3455		