

AGENCY PUBLIC ASSISTANCE HANDBOOK

EMERGENCY ASSISTANCE DECLARATION (FEMA-3186-EM-NY)

**NORTHEAST POWER OUTAGE – AUGUST 14, 2003 AT 1610 HOURS THROUGH AUGUST 16,
2003 AT 1610 HOURS**

Michael R. Bloomberg, Mayor
John Odermatt, Commissioner, Office of Emergency Management
Mark Page, Director, Mayor's Office of Management and Budget

Administered through the State Emergency Management Office

George E. Pataki, Governor
Edward F. Jacoby, Jr., Director

Table of Contents

Topic	Page
Program Overview	3
Program Administration	3
Cost Information	3
Cost Share	3
Payment Information	3
General Eligibility Information	4
Specific Eligibility Information	4-7
Force Account Labor	4-5
Temporary Extra Hires and Backfill	5
Force Account Equipment	5-6
Rented Equipment	6
Contracts	6
Mutual Aid	7
Funds from Other Sources	7
Claims Submittal Process	7-10
Notice of Claim and Designation of Agency Authorized Agent	7-8
Agency Kick-off Meeting	8
Project Worksheet Development	8-10
Project Management	10-11
Appeals	10
Audits and Document Retention	10
Establishing Files	10-11
Audits	11
Document Retention	11
Project Closeout	11
Attachment A: Declared Area	12-13
Attachment B: FEMA Equipment Rates	14
Attachment C: FEMA Forms	15
Attachment D: PA-1 – Notice of Claim and Designation of Agency Authorized Agent	16
Attachment E: PA-2 – PW Authorization Coversheet	17
Attachment F: Citywide Claims Management Process Flowchart	18
Attachment G: Points of Contact	19-20

I. Program Overview

The Federal Emergency Management Agency (FEMA) Public Assistance Emergency Assistance Program provides **supplemental reimbursement** for Emergency Protective Measures that address the most critical emergency needs during an emergency. Emergency Protective Measures are activities taken to save lives, to protect public health and safety, and to protect improved property.

II. Program Administration

The New York State Emergency Management Office (SEMO) is responsible for managing and administering this program and serves as the “grantee.”

The New York City Office of Emergency Management (OEM) and the Mayor’s Office of Management and Budget (OMB) are responsible for management of City Agency Public Assistance claims and serve as the City’s Authorized Agents. Through OEM and OMB, the City is the “sub-grantee” or “applicant” for a Public Assistance declaration.

Individual City agencies are responsible for compiling cost information from departments/divisions/units and submitting that information through the Citywide Claims Management Process. City agencies are responsible for designating an “Agency Authorized Agent” to administer this program for their agency.

III. Cost Information

1. Cost Share

75 percent reimbursed by FEMA

12.5 percent reimbursed by SEMO

87.5 percent total reimbursement eligible under this declaration

2. Payment Information

All reimbursements for FEMA 3186-EM-NY will be based on 100 percent of the work being completed at the time Project Worksheet (PW) is written. SEMO will process for payment and remit the full 87.5 percent at the time of obligation.

IV. General Eligibility Information

1. Activities must be a direct result from the August 14-16, 2003 power outage for which the President declared an emergency. The eligible period for this event is between August 14 at 1610 hours and August 16, 2003 1610 hours (a continuous 48-hour period). **All** expenses must have occurred during this timeframe.
2. Eligible activities are for Category B (Emergency Protective Measures) work only.
3. Activities must be within the designated disaster area (**for the declaration all counties in the State have been declared**). Please note that if your agency conducted outage-related activities outside of the five boroughs, but within the State (e.g., the watershed) those expenses may be eligible for reimbursement.
4. Outage-related activities must total more than \$1,000.
5. Outage-related expenses must not be eligible for reimbursement under the authority of another federal program, including Federal Highway Administration roads, streets, and feeder streets.

V. Specific Eligibility Information

1. Force Account Labor

Force account labor is defined as using regularly employed personnel to perform Emergency Protective Measures. Only force account overtime costs are eligible when performing emergency work.

NOTE: Records for straight-time salaries incurred during the performance of emergency work are still required to verify equipment usage. Total equipment hours should not exceed labor hours. If there is a discrepancy, include the supporting documentation for justification. As an example, an agency shows more labor hours than equipment hours; however, the union contract contains overtime provisions on allowable and payable hours during a workday. This provision increases a laborer's total hours for a workday but does not (nor should it) increase the equipment usage hours. The agency must include the provision of the contract to justify the increased labor hours.

Please note that superintendents, supervisors and foremen are generally not eligible for reimbursement. However, if the manager was a "working" supervisor (i.e., actually operating a piece of equipment -- not delegating who does the work), the time is reimbursable. Your agency must document this! Payroll and equipment logs must also support each request.

Each employee to be claimed must be identified by name and working title. The summary of labor costs should include:

- Days worked;
- Hours worked per day;
- Rate of pay (regular and/or overtime);
- Fringe benefits rate, total pay;

Payroll Management System Reports are acceptable documentation.

2. Temporary/Extra Hires and Backfill

When a regular employee is sent to the field to perform disaster work, frequently a person backfills their normal position. There are a few circumstances that affect the eligibility of backfill:

- If the backup person is an extra hire, the cost of this extra person represents an additional expense to the applicant. Both regular time and overtime are eligible.
- If the backup person is a regular employee from another department who is working their normal shift, there is no extra cost incurred. Only overtime is eligible.
- If the backup person is a regular employee who is called in on their day off (weekend or other), there is an extra cost. Both regular and overtime are eligible.
- If the backup person is called in from vacation, there should be no extra cost as the vacation can be rescheduled. Only overtime is eligible.

3. Force Account Equipment

Force account equipment is defined as agency-owned equipment. Only operating time for force account equipment is eligible - down time cannot be included. Equipment not in actual use is considered on standby and is not eligible for reimbursement. Also ineligible are new equipment purchases, repairs, gasoline and diesel fuel costs (repairs, maintenance, and fuel costs are included in the FEMA Schedule of Equipment Rates as part of the established rate).

The Equipment Rate List (**Attachment B**) can be used for agency-owned equipment. FEMA will provide rates for any equipment not listed; you will need to provide the make, model number, and any other pertinent information that may help in establishing a rate.

Documentation for agency-owned equipment must show the:

- Equipment description and operator's name;
- Dates and total hours used;
- Cost per hour with total cost for each item; and
- Total cost of all equipment used.

Total equipment hours should be compared to appropriate personnel hours to ensure both are accurate.

Equipment logs and records must identify each piece of equipment used for outage-related work at each site. Ensure operator/dispatcher logs and other actual field records are accurately kept, copied, and consolidated onto the Force Account Equipment or the Rented Equipment Record forms (**Attachment C**).

4. Rented Equipment

For rented equipment, the documentation must also show the date(s) the equipment was used, the amount paid, and the check number for evidence of payment. The rental agreement must specify who is responsible for all repairs to the equipment.

Documentation for rented equipment must show the:

- Equipment description and operator's name;
- Dates and total hours used;
- Cost per hour with total cost for each item; and
- Total cost of all equipment used.

Total equipment hours should be compared to appropriate personnel hours to ensure both are accurate.

Equipment logs and records must identify each piece of equipment used for outage-related work at each site. Ensure operator/dispatcher logs and other actual field records are accurately kept, copied, and consolidated onto the Force Account Equipment or the Rented Equipment Record forms (**Attachment C**).

5. Contracts

Contract work for this disaster will be reviewed on a case-by-case basis to ensure proper and fair reimbursement for all agencies.

6. Mutual Aid

If costs are incurred under a mutual aid or other agreement, the agency must have paid the salaries of employees providing mutual aid assistance. FEMA has determined that these agreements serve the same purpose as extra hires and that they are eligible costs. However, if the mutual aid is provided at no additional expense to the applicant, then these costs are not eligible.

Reimbursement cannot be provided unless a cost has been incurred. For Seasonal Contracts, it is suggested a copy of the complete agreement be kept with the files. The Public Assistance Coordination (PAC) or Public Assistance Liaison (PAL) will review, with the agency, the contract for an equitable reimbursement cost.

7. Funds from Other Sources

It is required that agencies inform the PAC-PAL Team of other sources of funding, such as funding from other Federal programs and charge backs. The duplicate amount received will be deducted from the total eligible amount.

VI. Claims Submittal Process

1. Notice of Claim and Designation of Agency Authorized Agent

Each agency that incurred expenses must submit City Public Assistance Form 1 (PA-1) Notice of Claim and Designation of Agency Authorized Agent (**Attachment D**). This form officially notifies OEM, OMB, SEMO, and FEMA of your agency's intent to apply for Public Assistance Funding and initiates the grant process.

The Agency Authorized Agent should have decision-making authority and be:

1. Knowledgeable of the Public Assistance Process in New York City
2. Knowledgeable of damages and/or costs incurred
3. Available for meetings concerning the Agency's Public Assistance claims

Additionally, the Agency Authorized Agent will have overall responsibility to:

1. Consolidate claim documentation from all departments/divisions/units within the agency
2. Submit claims through the Citywide Claims Process in a timely manner

3. Ensure projects are completed in accordance with requirements under the Public Assistance Program

2. Agency Kick-off Meeting

The agency kick-off meeting is the initial meeting between SEMO, FEMA, OMB, and the City agency to determine eligible project work and to advise agencies on the process to secure funding. If needed, the FEMA Public Assistance Coordinator (PAC) and the State Public Assistance Liaison (PAL) will hold additional meetings with the agency to provide more detailed assistance.

To expedite the claims process, a working meeting will immediately follow the agency briefing. If additional meetings are necessary beyond the kick-off meeting, it will be arranged during the kick-off.

3. Project Worksheet Development

The PW is used to identify projects within the agency and to describe the scope of work for a particular project. The PW is the basis for all reimbursement for outage-related activities subsequent to this emergency declaration. Agencies will have **30 days** from the Applicant's Briefing/Kick-off Meeting to assemble the paperwork and to complete the PWs.

The PW development process is as follows (also refer to accompanying Flow Chart):

1. Either the PAC-PAL Team (The PAC-PAL team can help to prepare the PWs relieving the agency of burdensome administrative requirements) or the City agency develops a PW
2. The developer of the PW will:
 - a. Complete City Public Assistance Form 2 (PA-2) PW Authorization Coversheet (**Attachment E**) and attach to the PW
 - b. Submit the package to copy to the Agency's Authorized Agent for review
 - c. Submit the package to the State Emergency Management Office (SEMO) Public Assistance Liaison (PAL)
 - i. The PAL will:
 1. Review the PW for completeness, work eligibility, and reasonableness of costs
 - d. Submit the package to the Federal Emergency Management Agency (FEMA) Public Assistance Coordinator (PAC)
 - i. The PAC will:
 1. Review the PW for completeness, work eligibility, and reasonableness of costs

2. Enter the PW into the National Emergency Management Information System (NEMIS) to facilitate internal reviews conducted by FEMA
3. Input the PW Number onto PA-2
3. If the Agency's Authorized Agent agrees with the scope of work and cost estimate described within the PW he/she will:
 - a. Sign PA-2
 - b. Forward a copy of PA-2 and the PW to their Mayor's Office of Management and Budget (OMB) Task Force Representative
4. If the Agency's Authorized Agent does not agree with the scope of work and/or cost estimate described within the PW he/she will:
 - a. Consult with the individual who developed the PW
 - b. Make any changes necessary
 - c. Sign PA-2
 - d. Forward a copy of PA-2 and the PW to the OMB Task Force Representative
5. If the OMB Task Force Representative agrees with the scope of work and cost estimate described within the PW he/she will:
 - a. Sign PA-2
 - b. Forward PA-2 and the PW to the OMB Associate Director
6. If the OMB Task Force Representative does not agree with the scope of work and /or cost estimate described within the PW he/she will:
 - a. Consult with the Agency's Authorized Agent
 - b. Make any changes necessary
 - c. Sign PA-2
 - d. Forward PA-2 and the PW to the OMB Associate Director
7. If the OMB Associate Director agrees with the scope of work and cost estimate described within the PW he/she will:
 - a. Sign PA-2
 - b. Forward PA-2 and the PW to the Office of Emergency Management (OEM)
8. If the OMB Associate Director does not agree with the scope of work and/or cost estimate described within the PW he/she will:
 - a. Consult with the OMB Task Force Representative
 - b. Make any changes necessary
 - c. Sign PA-2
 - d. Forward PA-2 and the PW to OEM
9. If the OEM Director of Recovery and Mitigation agrees with the scope of work, cost estimate, and finds all necessary attachments he/she will:
 - a. Make any changes necessary
 - b. Sign PA-2
 - c. Forward PA-2 and the PW to SEMO
10. If the OEM Director of Recovery and Mitigation does not agree with the scope of work and/or cost estimate or does not find all necessary attachments he/she will:
 - a. Consult with the OMB Associate Director

- b. Make any changes necessary
 - c. Locate missing attachments
 - d. Sign the PA-2
 - e. Forward PA-2 and the PW to SEMO
11. The SEMO representative will review PA-2 and the PW for completeness. If PA-2 and/or the PW are not complete, the SEMO representative will:
 - a. Contact OEM to obtain missing attachments and/or signatures
 12. When the SEMO representative is satisfied that PA-2 and the PW are complete he/she will:
 - a. Forward a copy of PA-2 and the PW to FEMA
 13. The FEMA representative will review PA-2 and the PW for completeness. If PA-2 and/or the PW are complete he/she will:
 - a. Review the PW for eligibility and reasonableness of cost
 14. If the FEMA representative finds all work is eligible and costs are reasonable he/she will:
 - a. Obligate eligible work in NEMIS (**NOTE** – PA-2 must be completed prior to obligation)
 - b. Notify SEMO
 15. If the FEMA representative finds that some/all work is ineligible and/or costs are unreasonable, he/she will:
 - a. Consult with SEMO and OEM
 - b. Make any changes necessary
 - c. Obligate eligible work in NEMIS
 16. If the FEMA representative alters the PW as submitted by the City, OEM and OMB will consult to determine if an appeal is warranted.

VII. Project Management

1. Appeals

Appeals are managed by OEM and will be made on a case-by-case basis through consultation with OMB and the Agency Authorized Agent.

2. Audits and Document Retention

i. Establishing Files

It is strongly recommended that agencies immediately establish a separate folder to collect documentation for each project submitted. The file should contain any and all records that detail the work performed and expenses incurred. All expenditures for wages, supplies, equipment, and contract documents for each project must have supporting documentation in the folder.

File Example

Invoices and inventory records for supplies, materials, and purchases
Labor Records/Payroll
Daily Activity Reports of personnel/equipment
Rental/Lease Agreements
Contract Documents

Files for Rental Agreements

A separate vendor invoice file should be established with copies of all rental agreements and invoices from equipment vendors. Also, a copy of the rental agreement must be maintained in the PW file.

ii. Audits

The FEMA Inspector General reserves the right to perform an audit at any time.

iii. Document Retention

Keep all original documentation and ensure copies are available for review if necessary.

All files associated with claims should be kept for at least 3 years following closeout of this declaration. (Note – this may be four or even five years in the future.)

3. Project Closeout

The Governor's Authorized Representative (GAR) will sign the P4 forms certifying that all work was completed in accordance with the Robert T. Stafford Act Emergency Relief and Disaster Assistance Act, Public Law 93-288, as amended. The Agency's Authorized Agent's signature on the Project Worksheets forms certification will be accepted in lieu of the Authorized Agent's signature on the P4 Project Completion Form.

Attachment A

Declared Area

Note: The entire State of New York has been declared a disaster area for this event.

Attachment B

FEMA Cost Codes

Attachment C

FEMA Forms

Attachment D

PA-1

Attachment E

PA-2

Attachment F

Citywide Claims

Management

Process Flowchart

Attachment G

Points of Contact

Agency	Name	Contact information
Mayor's Office of Management and Budget	Jeffrey Garofalo	212-788-5346 GarofaloJ@omb.nyc.gov
Mayor's Office of Management and Budget	Mariel Diaz	212-788-5816 DiazM@omb.nyc.gov
NYC Office of Emergency Management	MaryAnn Marrocolo	718-422-4835 mmarroco@oem.nyc.gov
NYC Office of Emergency Management	Public Assistance Website	www.nyc.gov/oem (Follow links to Recovery and Mitigation and Recovery for City agencies)
State Emergency Management Office	Chris Holmes	518 457-7082 Christopher.Holmes@semo.state.ny.us
State Emergency Management Office	Denise Lorette	518 457-7082 Denise.Lorette@semo.state.ny.us
State Emergency Management Office	Recovery Section Fax	518 485-2713
State Emergency Management Office	Recovery Section Website for Declaration	http://www.nysemo.state.ny.us/Recovery/3186/3186powerout.htm

Attachment C

FEMA Forms

**FEDERAL EMERGENCY MANAGEMENT AGENCY
MATERIALS SUMMARY RECORD**

Page

of

1. APPLICANT	2. PA ID	3. PW #	4. DISASTER NUMBER
5. LOCATION/SITE		6. CATEGORY	7. PERIOD COVERING to
8. DESCRIPTION OF WORK PERFORMED			

VENDOR	DESCRIPTION	QUAN.	UNIT PRICE	TOTAL PRICE	DATE PURCHASED	DATE USED	INFO FROM (CHECK ONE)	
							INVOICE	STOCK
			\$	\$			<input type="checkbox"/>	<input type="checkbox"/>
			\$	\$			<input type="checkbox"/>	<input type="checkbox"/>
			\$	\$			<input type="checkbox"/>	<input type="checkbox"/>
			\$	\$			<input type="checkbox"/>	<input type="checkbox"/>
			\$	\$			<input type="checkbox"/>	<input type="checkbox"/>
			\$	\$			<input type="checkbox"/>	<input type="checkbox"/>
			\$	\$			<input type="checkbox"/>	<input type="checkbox"/>
			\$	\$			<input type="checkbox"/>	<input type="checkbox"/>
			\$	\$			<input type="checkbox"/>	<input type="checkbox"/>
			\$	\$			<input type="checkbox"/>	<input type="checkbox"/>
			\$	\$			<input type="checkbox"/>	<input type="checkbox"/>
			\$	\$			<input type="checkbox"/>	<input type="checkbox"/>
			\$	\$			<input type="checkbox"/>	<input type="checkbox"/>
			\$	\$			<input type="checkbox"/>	<input type="checkbox"/>
GRAND TOTAL				\$				

I CERTIFY THAT THE ABOVE INFORMATION WAS OBTAINED FROM PAYROLL RECORDS, INVOICES, OR OTHER DOCUMENTS THAT ARE AVAILABLE FOR AUDIT.

CERTIFIED	TITLE	DATE
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**FEDERAL EMERGENCY MANAGEMENT AGENCY
FORCE ACCOUNT LABOR SUMMARY RECORD**

Page

of

1. APPLICANT	2. PA ID	3. PW #	4. DISASTER NUMBER
5. LOCATION/SITE		6. CATEGORY	7. PERIOD COVERING to
8. DESCRIPTION OF WORK PERFORMED			

NAME	DATES AND HOURS WORKED EACH WEEK								COSTS				
	DATE								TOTAL HOURS	HOURLY RATE	BENEFIT RATE/HR	TOTAL HOURLY	TOTAL COSTS
NAME	REG.									\$	/	\$	\$
JOB TITLE	O.T.									\$	/	\$	\$
NAME	REG.									\$	/	\$	\$
JOB TITLE-	O.T.									\$	/	\$	\$
NAME	REG.									\$	/	\$	\$
JOB TITLE	O.T.									\$	/	\$	\$
NAME	REG.									\$	/	\$	\$
JOB TITLE	O.T.									\$	/	\$	\$
NAME	REG.									\$	/	\$	\$
JOB TITLE	O.T.									\$	/	\$	\$
Total Cost for Force Account Labor Regular Time												➔	\$
Total Cost for Force Account Labor Overtime												➔	\$

I CERTIFY THAT THE ABOVE INFORMATION WAS OBTAINED FROM PAYROLL RECORDS, INVOICES, OR OTHER DOCUMENTS THAT ARE AVAILABLE FOR AUDIT.

CERTIFIED	TITLE	DATE
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Attachment D

PA-1

**City of New York
Office of Emergency Management**

Notice of Claim and Designation of Agency Authorized Agent (Instructions on Reverse)

Today's Date	
Declaration Number	
Agency	
Mailing Address	

Agency Authorized Agent	Name	
	Title	
	Office Telephone	
	Cellular Telephone	
	E-mail	
	Fax	

Alternate Agency Authorized Agent	Name	
	Title	
	Office Telephone	
	Cellular Telephone	
	E-mail	
	Fax	

For SEMO Use Only

Agency FIPs Number

**City of New York
Office of Emergency Management**

Notice of Claim and Designation of Agency Authorized Agent Instructions

Today's Date	Enter today's date
Declaration Number	Enter the FEMA Declaration Number (This may already be entered)
Agency	Enter the name of the City Agency
Mailing Address	Enter a mailing address for the City Agency

Agency Authorized Agent	Name	Enter the name of the Agency Authorized Agent
	Title	Enter the title of the Agency Authorized Agent
	Office Telephone	Enter an office telephone number for the Agency Authorized Agent
	Cellular Telephone	Enter a cellular telephone number for the Agency Authorized Agent
	E-mail	Enter an e-mail address for the Agency Authorized Agent
	Fax	Enter a fax number for the Agency Authorized Agent

Alternate Agency Authorized Agent	Name	Enter the name of the Alternate Agency Authorized Agent
	Title	Enter the title of the Alternate Agency Authorized Agent
	Telephone	Enter an office telephone for the Alternate Agency Authorized Agent
	E-mail	Enter an e-mail address for the Alternate Agency Authorized Agent
	Fax	Enter a fax number for the Alternate Agency Authorized Agent

Additional Information

This form officially notifies OEM, OMB, SEMO, and FEMA of your agency's intent to apply for Public Assistance Funding and initiates the grant process.

The Agency Authorized Agent should have decision-making authority and be:

1. Knowledgeable of the Public Assistance Process in New York City
2. Knowledgeable of damages and/or costs incurred
3. Available for meetings concerning the Agency's Public Assistance claims

Additionally, the Agency Authorized Agent will have overall responsibility to:

1. Consolidate claim documentation from all departments/divisions/units within the agency
2. Submit claims through the Citywide Claims Process in a timely manner
3. Ensure projects are completed in accordance with requirements under the Public Assistance Program

Attachment E

PA-2

**City of New York
Office of Emergency Management**

Project Worksheet (PW) Authorization Coversheet (Instructions on Reverse)

Declaration Number							
Internal Agency Tracking Number							
FEMA PW Number							
OMB Tracking Number							
Agency							
Category of Work	A	B	C	D	E	F	G
Percent Complete							
Does this PW contain Ineligible Items?	YES				NO		
If yes, describe							
Is this a revision to an older PW?	YES				NO		
If yes, describe changes made							
Signature: Agency Authorized Agent						Date	
Agency Authorized Agent Name							
Signature: OMB Taskforce Assistant Director						Date	
Signature: OMB Associate Director						Date	
Signature: OEM Director of Recovery and Mitigation						Date	
Additional Information							
This form signifies to the Federal Emergency Management Agency (FEMA) that the City of New York has reviewed the attached Project Worksheet (PW) and approves its obligation. However, this form does not indicate agreement with determinations made by FEMA within the PW – disagreements will be settled by appeal following obligation.							

**City of New York
Office of Emergency Management**

Project Worksheet (PW) Authorization Coversheet Instructions

Declaration Number	Enter the FEMA Declaration Number (This may already be entered)
Internal Agency Tracking Number	Enter the tracking number used internally by the City Agency
FEMA PW Number	Enter the NEMIS issued PW Number (To be completed by FEMA)
OMB Tracking Number	Enter the OMB Tracking Number (To be completed by OMB)
Agency	Enter the City Agency name
Category of Work	Circle the appropriate FEMA Work Category (See below for listing)
Percent Complete	Enter the percent of work complete at the time this PW is written
Does this PW contain Ineligible Items?	Circle "Yes" or "No"
If yes, describe	Briefly describe what items are ineligible within this PW – if possible provide cost information
Is this a revision to an older PW?	Circle "Yes" or "No"
If yes, describe changes made	NOTE – THIS IS NOT FOR PW VERSIONS. THIS IS FOR CHANGES MADE PRIOR TO AUTHROIZATION! Briefly describe the changes made.

Signature: Agency Authorized Agent	Sign	Date	Enter date signed
Agency Authorized Agent Name	Print Name		
Signature: OMB Taskforce Assistant Director	Sign	Date	Enter date signed
Signature: OMB Associate Director	Sign	Date	Enter date signed
Signature: OEM Director of Recovery and Mitigation	Sign	Date	Enter date signed

Additional Information

FEMA Work Categories

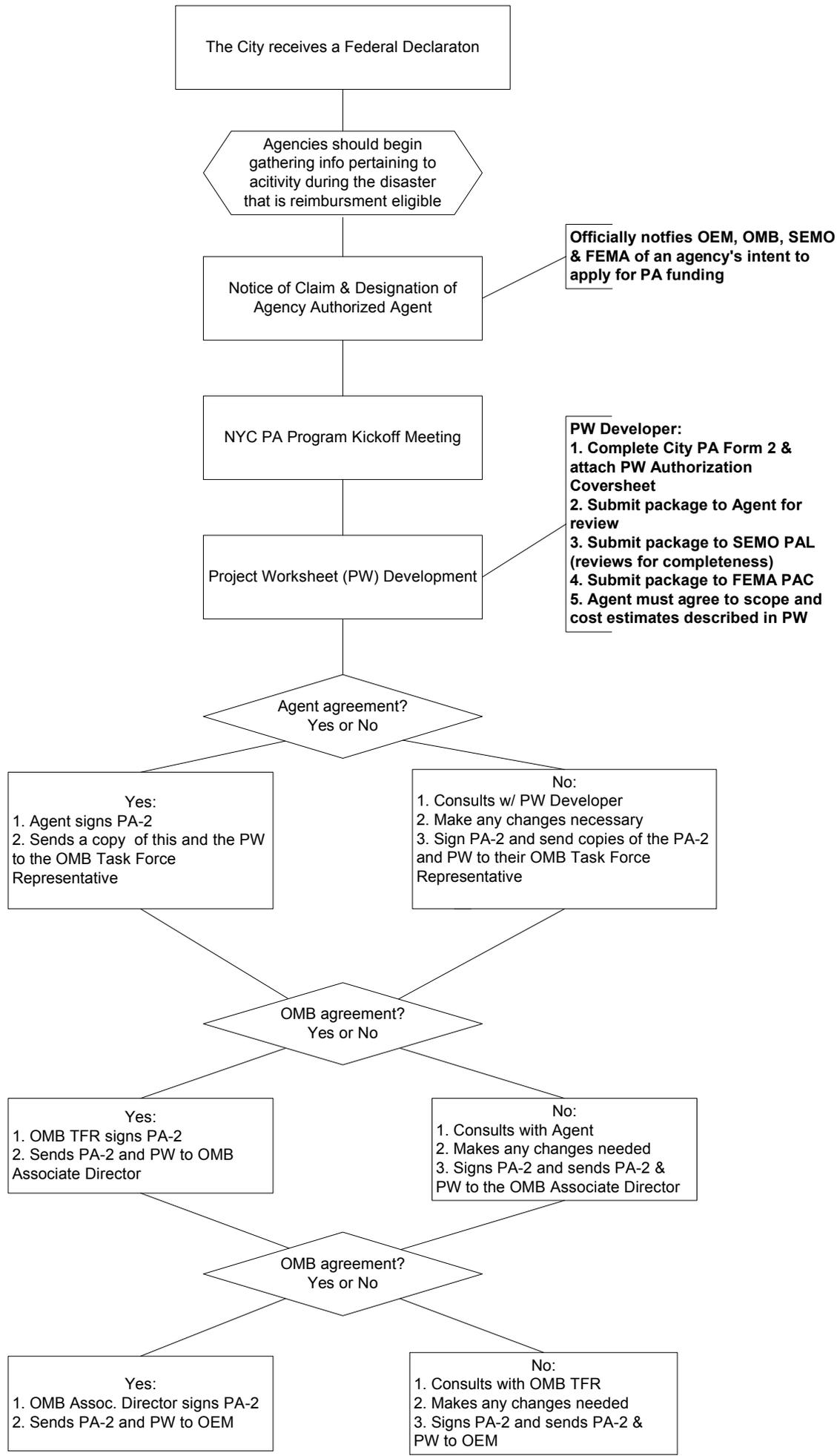
Category A: Emergency Work – Debris Removal
 Category B: Emergency Work – Emergency Protective Measures
 Category C: Permanent Work – Road Systems
 Category D: Permanent Work – Water Control Facilities
 Category E: Permanent Work – Buildings and Equipment
 Category F: Permanent Work – Public Utility Systems
 Category G: Permanent Work – Other

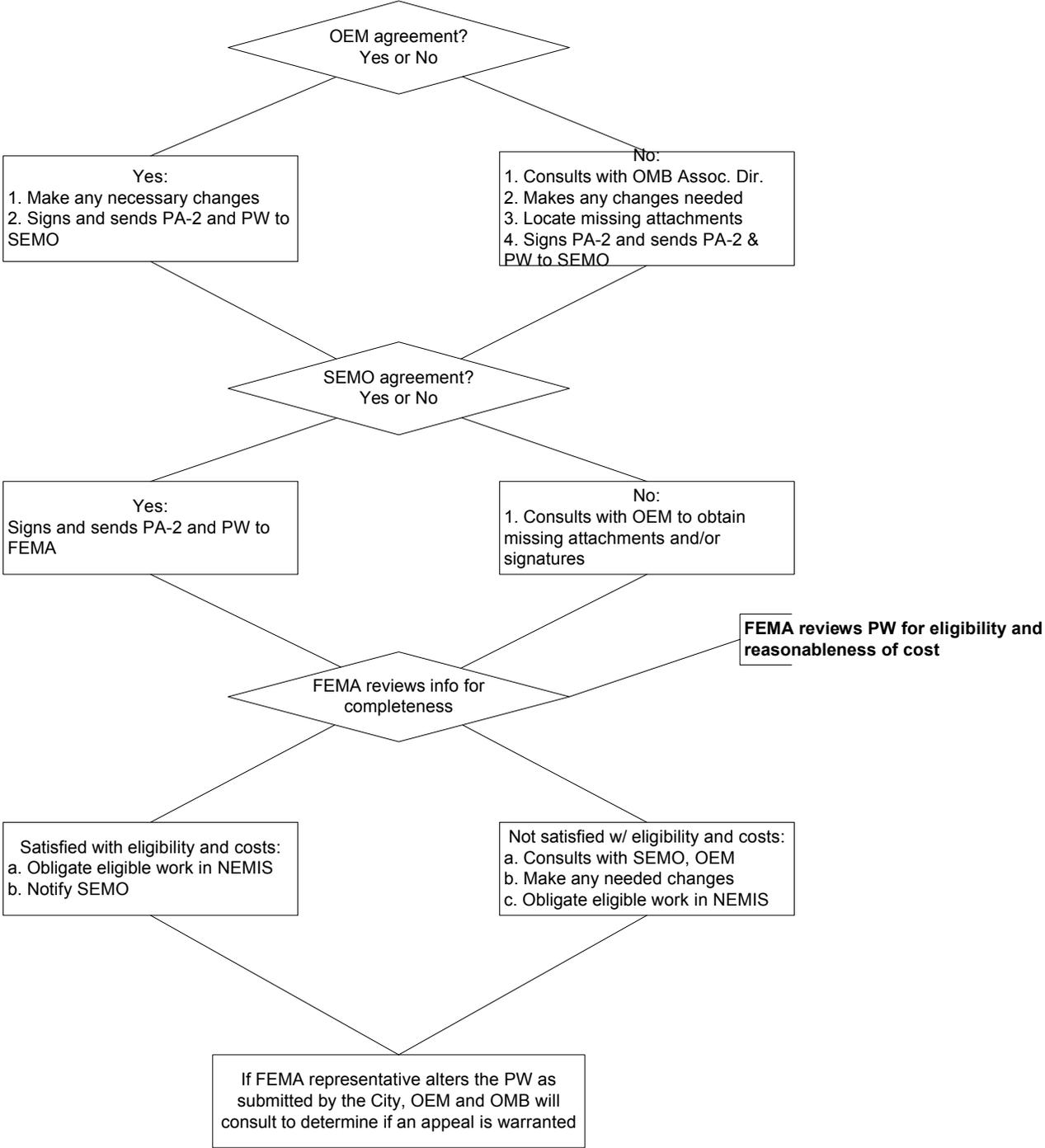
Attachment F

Citywide Claims

Management

Process Flowchart





Attachment G

Points of Contact

Agency	Name	Contact information
Mayor's Office of Management and Budget	Jeffrey Garofalo	212-788-5346 GarofaloJ@omb.nyc.gov
Mayor's Office of Management and Budget	Mariel Diaz	212-788-5816 DiazM@omb.nyc.gov
NYC Office of Emergency Management	MaryAnn Marrocolo	718-422-4835 mmarroco@oem.nyc.gov
NYC Office of Emergency Management	Public Assistance Website	www.nyc.gov/oem (Follow links to Recovery and Mitigation and Recovery for City agencies)
State Emergency Management Office	Chris Holmes	518 457-7082 Christopher.Holmes@semo.state.ny.us
State Emergency Management Office	Denise Lorette	518 457-7082 Denise.Lorette@semo.state.ny.us
State Emergency Management Office	Recovery Section Fax	518 485-2713
State Emergency Management Office	Recovery Section Website for Declaration	http://www.nysemo.state.ny.us/Recovery/3186/3186powerout.htm