



**State of Georgia, Critical Workforce**  
**2011-2015 DISASTER RE-ENTRY PERMIT**  
**-APPLICATION-**

**AGENCY/COMPANY/ORGANIZATION/FACILITY:** \_\_\_\_\_  
**OFFICE ADDRESS:** \_\_\_\_\_  
**MAILING ADDRESS (IF DIFFERENT):** \_\_\_\_\_  
**OFFICE PHONE NUMBER:** \_\_\_\_\_  
**OFFICE FAX NUMBER:** \_\_\_\_\_  
**REQUESTING AUTHORITY:** \_\_\_\_\_  
**POSITION/TITLE:** \_\_\_\_\_  
**CONTACT PHONE NUMBER:** \_\_\_\_\_  
**EMAIL ADDRESS:** \_\_\_\_\_  
**ALTERNATE CONTACT NAME:** \_\_\_\_\_  
**ALTERNATE CONTACT PHONE NUMBER:** \_\_\_\_\_  
**ALTERNATE EMAIL ADDRESS:** \_\_\_\_\_

**JUSTIFICATION AND REASON FOR REQUEST:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Does the requesting agency/company/organization or facility have a property trained and self-sufficient HAZMAT or Emergency Response Team? YES NO

Does the requesting agency/company/organization or facility have a current TIER II REPORT on file with the State of Georgia and /or the Effingham Emergency Management Agency? (HAZMAT ONLY) YES NO N/A

Does the requesting agency/company/organization or facility agree to report its status and provide status updates to the Effingham County Emergency Operations Center? YES NO

Does the requesting agency/company/organization or facility agree to provide basic life support needs for those personnel re-entering the area. This includes: food, water, shelter, basic medical first aid, and other support as required for at least five (5) days? YES NO

**THE REQUESTING AUTHORITY, ALONG WITH THE COMPANY, AGENCY, ORGANIZATION, OR FACILITY ON BEHALF OF WHICH A PERMIT IS ISSUED, IS RESPONSIBLE IN-TOTAL FOR THE ACCOUNTABILITY AND USE OF THE RE-ENTRY PERMITS ISSUED/PROVIDED BY EEMA. USE OF THE PERMITS FOR REASONS OTHER THAN INTENDED, OR BY PERSONS WITHOUT VALID AND/OR OFFICIAL AUTHORIZATION TO RE-ENTER THE AFFECTED AREA PRIOR TO PUBLIC RE-ENTRY, MAY PRECLUDE FUTURE PERMITS FROM BEING ISSUED TO THE RESPONSIBLE REQUESTING AUTHORITY, AND/OR, HIS/HER COMPANY, AGENCY, ORGANIZATION, OR FACILITY.**

Effingham County has adopted the United States Department of Homeland Security National Incident Management System (NIMS), as established under Homeland Security Presidential Directive 5; and the Unified Command System established The Official Code of Georgia, Annotated, 38-3-57; as its system of preparing for and responding to disaster incidents. All incident managers and response organizations in Effingham County will conduct training and use these systems as part of their Emergency Response Operations.

\_\_\_\_\_  
**Requesting Authority**  
**SIGNATURE**

**APPLICATION # \_\_\_\_\_**  
**(For EEMA Use ONLY)**