

Guidance for Completing the Disaster Declaration Request Form

Introduction

The primary purpose of this guide is to aid state, federally recognized Indian tribal government (Tribal Nation), and territory (STT) government leadership, as well as emergency management officials, in completing the “Request for Presidential Disaster Declaration Major Disaster or Emergency” (Federal Emergency Management Agency [FEMA] Form 010-0-13). FEMA Form 010-0-13 is an essential element of a declaration request, the completion of which ensures that the minimum legal requirements for the declaration request are satisfied. A separate declaration request cover letter supplements FEMA Form 010-0-13 and provides a narrative description of the incident, response and recovery activities, and additional information regarding the request.

This guide provides a thorough definition, guidance, and examples to properly input the requested information. This guide is intended to help elected leadership and emergency management officials understand and complete FEMA Form 010-0-13 to satisfy all the essential elements and requirements needed for FEMA to process a declaration request.

Guidance – Boxes 1 to 5

BOX 1: REQUEST DATE

Insert the date the STT government is submitting the request.

- This date should match the governor’s or Tribal Chief Executive’s signature date in Box 15, as well as the date of the declaration request cover letter.
- A request for a major disaster must be submitted within 30 days of the occurrence of the incident or within 30 days of the end of the incident period, whichever is later, in order to be considered.
- A request for an emergency declaration must be submitted within 5 days after the need for assistance becomes apparent, but not longer than 30 days after the occurrence of the incident, in order to be considered.
- The request date may be later than the outlined dates if a time extension was previously approved. If the request is submitted later than the outlined dates, there must be a time extension request that was requested within 30 days of the occurrence of the incident period or within 30 days of the end of the incident period, whichever is later, and subsequently approved.



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BOX 2: (A) NAME OF STATE OR TRIBAL NATION REQUESTING DECLARATION	BOX 2: (B) POPULATION
List the name of the STT government requesting the declaration.	<p>For states and territories, use the state/territory government population figure, as reported by the 2020 Census.</p> <p>For Tribal Nations, use the population of enrolled tribal members on or near the damaged area(s) who may be impacted by the event – as reported by the Tribal Nation.</p>
BOX 3: GOVERNOR’S OR TRIBAL CHIEF EXECUTIVE’S NAME	BOX 4: DESIGNATION OF STATE OR TRIBAL COORDINATING OFFICER UPON DECLARATION AND TELEPHONE NUMBER
List the name of the state governor or Tribal Chief Executive as it appears on the state’s or Tribal Nation’s website or correspondence letterhead.	List the name and telephone number of the state or Tribal Coordinating Officer.
BOX 5: DESIGNATION OF GOVERNOR’S OR TRIBAL CHIEF EXECUTIVE’S AUTHORIZED REPRESENTATIVE UPON DECLARATION (IF AVAILABLE) AND PHONE NUMBER	
If available, provide the names and contact information of the authorized representatives. Names may not be initially available.	

Guidance – Boxes 6 to 9

BOX 6: DECLARATION REQUEST FOR:

Check one of the following two boxes for the type of declaration request.

Major Disaster (Stafford Act Sec. 401)

Emergency (Stafford Act Sec. 501(a))

- Use this request form for only these two types of declarations.
- There is a separate process to use when submitting a request for a Fire Management Assistance Grant ([FEMA Form 078-0-1](#)).

BOX 7: INCIDENT PERIOD

Enter the incident period, to include beginning and end dates. Date(s) can be entered manually or by using the drop-down calendar to select date(s).

If the incident is ongoing, check the “Continuing” box.

Note: If requesting for a pre-landfall or pre-disaster emergency, check the “Continuing” box.

7. Incident Period: Beginning Date End Date or Continuing

BOX 7(B): TYPE OF INCIDENT

Check the box(es) that best describes the primary cause of the incident that is the subject of the declaration request. If secondary causes apply to the incident, check the additional boxes.

<input type="checkbox"/> Drought	<input type="checkbox"/> Earthquake	<input type="checkbox"/> Explosion	<input type="checkbox"/> Fire	<input type="checkbox"/> Flood	<input type="checkbox"/> Hurricane	<input type="checkbox"/> Landslide	<input type="checkbox"/> Mudslide
<input type="checkbox"/> Severe Storm (rain, high water, wind-driven, rain, hail, lightning)	<input type="checkbox"/> Snowstorm (Must include Enclosure D: Historic and Current Snowfall Data)			<input type="checkbox"/> Straight-Line Winds			
<input type="checkbox"/> Tidal Wave	<input type="checkbox"/> Tornado	<input type="checkbox"/> Tropical Depression	<input type="checkbox"/> Tropical Storm	<input type="checkbox"/> Tsunami	<input type="checkbox"/> Volcanic Eruption	<input type="checkbox"/> Winter Storm	
<input type="checkbox"/> Other (please specify)	<input type="text"/>						

- The previous boxes reference the Stafford Act’s list of incidents. For “Hurricane,” there is no need to also check severe storms, flood, or to add heavy rains as “Other.” Hurricanes naturally encompass these elements.
- Note: If requesting snow assistance, check the “Snowstorm” box and include “Enclosure D: Historic and Current Snowfall Data” (as described in the *FEMA Public Assistance Policy and Program Guide*).
- For emergency declarations, if selecting “Other,” specify what the incident is.

BOX 8: DESCRIPTION OF DAMAGES

Provide a concise but specific description of the impacts of the disaster on the affected area and population.

- Examples include descriptions of debris, residential damage, power outages, and impacts to critical infrastructure (roads, bridges, major highways, hospitals, schools, and government facilities, including parks, etc.). Descriptions of impacts to community infrastructure and information regarding causalities, including deaths and injuries, should be included when requesting the Crisis Counseling Program under an emergency or major disaster declaration.
- Box 8 has an approximate 3,000-character limit. The cover letter provides more space for the STT government to give more detailed descriptions, facts, and timelines of the impact of the incident. Consider using the cover letter to expand on the concise summary provided in Box 8.

BOX 9: DESCRIPTION OF NATURE AND RESOURCES COMMITTED

Provide a description of the nature and amount of STT government resources which have been or will be committed.

- Examples include a description of emergency operations center activation, search and rescue efforts, emergency protective measures, evacuation notices, National Guard activation, etc.
- Box 9 has an approximate 3,000-character limit. The cover letter provides more space for the STT government to provide more detailed descriptions, facts, and timelines of the impact of the incident. Consider using the cover letter to expand on the concise summary provided in Box 9.

Guidance Box 10 – Joint Preliminary Damage Assessment

BOX 10: JOINT PRELIMINARY DAMAGE ASSESSMENT

Enter information related to the joint preliminary damage assessment, specific to Individual Assistance and/or Public Assistance. This includes dates requested, start dates, and end dates.

- Note: A preliminary damage assessment is not required for an emergency declaration request. If a preliminary damage assessment for a major declaration request has not been performed, but has been requested, provide the information in Box 10. If a preliminary damage assessment is not requested, skip to Box 11.

BOX 10 CONTINUED: INDIVIDUAL ASSISTANCE

If applicable, check the “Individual Assistance” box:

Dates Performed	Requested	Start	End

Individual Assistance

When selecting Individual Assistance, preliminary damage assessments should have been performed prior to filling out this form. If preliminary damage assessments have not been performed, but have been requested, provide that information.

- Provide all information if sites were inaccessible during the preliminary damage assessment because of various circumstances, such as hazardous conditions.
- Include the areas where preliminary damage assessment was requested and/or conducted.

BOX 10 CONTINUED: PUBLIC ASSISTANCE

If applicable, check the “Public Assistance” box:

Dates Performed	Requested	Start	End

Public Assistance

When selecting Public Assistance, preliminary damage assessments should have been performed prior to filling out this form. If preliminary damage assessments have not been performed, but have been requested, provide that information.

- Provide all information if sites were inaccessible during the preliminary damage assessment because of various circumstances, such as hazardous conditions.
- Include the areas where preliminary damage assessment was requested and/or conducted.

Guidance Box 11 – Programs and Areas Requested

BOX 11: PROGRAMS AND AREAS REQUESTED – INDIVIDUAL ASSISTANCE

If requesting Individual Assistance, check all applicable programs. Check the “All” box if requesting all Individual Assistance programs listed.

If Individual Assistance is not requested, check the “N/A” box and move to Public Assistance.

Individual Assistance
 N/A
 Individuals and Households Program
 Crisis Counseling Program
 Disaster Unemployment Assistance
 All
 Disaster Case Management
 Disaster Legal Services
 Small Business Administration (SBA) Disaster Assistance

Note: Obtaining Small Business Administration (SBA) assistance requires a separate request from the FEMA disaster declaration request.

As of December 23, 2022, the Crisis Counseling Program may be requested under an emergency declaration.

Specify the programs and areas, including counties, parishes, boroughs, and/or independent cities, requested or that are to be a part of the state’s request as separate recipients of Individual Assistance funding.

A Tribal Nation may request its own declaration or may request and choose to be included in a state’s declaration request.

- For states, identify all Tribal Nations in the requested areas.
- For Tribal Nations, list the Tribal Nation and/or Tribal Area(s) requested.
- If requesting Individual Assistance, attach Enclosure A: Supplemental Information for Individual Assistance, which includes preliminary damage assessment information and all data related to Individual Assistance.

BOX 11: PROGRAMS AND AREAS REQUESTED – PUBLIC ASSISTANCE

If requesting Public Assistance, select all the applicable programs. Note: “Permanent Work (Categories C-G)” is not available under an emergency declaration.

If Public Assistance is not requested, check the “N/A” box.

Public Assistance
 N/A
 Debris Removal (Category A)
 Emergency Protective Measures (Category B)
 Permanent Work (Categories C-G)*
(not available for Emergency Declaration Requests)

Specify the areas, including counties, parishes, boroughs, and/or independent cities, requested or that are to be a part of the state’s request as separate recipients of public assistance funding.

A Tribal Nation may request its own declaration or may request and choose to be included in a state’s declaration request.

Enclose additional documentation if more space is needed or if the request includes different categories for different jurisdictions.

- For states, identify all Tribal Nations in the requested areas.
- For Tribal Nations, list the Tribal Nation and/or Tribal Area(s) requested.
- If requesting Public Assistance, attach Enclosure B: Supplemental Information for Public Assistance, which includes preliminary damage assessment information and all data related to Public Assistance.

INDEMNIFICATION FOR DEBRIS REMOVAL ACTIVITY

For debris removal (Public Assistance Category A), there is a required “Indemnification of Debris Removal Activity” certification.

- If “Debris Removal (Category A)” is not being requested, check the box declining debris removal activity and move to the next box.
- If Category A is being requested, check the box that anticipates the need for debris removal.

REQUEST FOR DIRECT FEDERAL ASSISTANCE

If direct federal assistance is not requested, check the box declining the request and move to the next box.

If requesting direct federal assistance, check the box identifying the request and provide the following information in the accompanying boxes:

- I request the following type(s) of assistance: Provide the full list or type(s) of assistance requested. Examples include equipment, supplies, sheltering, and evacuation assistance.
- Provide a short explanation of reasons why the STT government cannot perform or contract for the required work and services.
- Review the required indemnification language for direct federal assistance – no action required. Requesting direct federal assistance indicates that the STT government agrees with this statement.

REQUEST FOR SNOW ASSISTANCE

Snow assistance is not available under an emergency declaration and requires a record or near record snowfall criteria to be met for potential inclusion in a major disaster declaration. For more information, refer to the *Public Assistance Program and Policy Guide*.

If snow assistance is not being requested, select “N/A.”

If requesting snow assistance, check the box requesting snow assistance.

- Provide a list of areas which are requesting snow assistance.
- Attach Enclosure D – Historic and Current Snowfall Data.

HAZARD MITIGATION

If requesting statewide hazard mitigation, there are two options:

- Check the box identifying the statewide option. Generally, the request or authorization will be statewide, or
- Request hazard mitigation for specific areas. List the applicable areas in the space provided.

For Tribal Nations applying as recipients, identify the Tribal Nation in the space provided.

Guidance Boxes 12 to 15

BOX 12: MITIGATION PLAN INFORMATION

Enter the mitigation plan expiration date.

Identify if the type of STT government mitigation plan is enhanced or standard by checking the appropriate box.

a. Mitigation Plan Expiration Date b. Type of Plan Enhanced Standard

BOX 13: OTHER FEDERAL AGENCY PROGRAMS

Indicate whether there are anticipated requirements from other federal agencies (OFA).

I do not anticipate requirements from Other Federal Agencies I do anticipate requirements from Other Federal Agencies

- If requirements from OFAs are not anticipated, check that box.
- If there are anticipated disaster assistance requirements from OFAs, check that box and attach Enclosure C: Requirements for Other Federal Agency Programs, and provide any known need of OFA assistance or indicate TBD if the need is not yet known.

BOX 14: FINDINGS AND CERTIFICATIONS

Check the box to certify the statements required for a declaration.

By checking the box, the governor or Tribal Chief Executive certifies the following:

- The incident is beyond the capabilities of the STT government, and supplemental federal assistance is necessary.
- The state, Tribal Nation, or territory emergency plan was executed. Enter the date for the execution of the emergency plan. The date can be entered manually or selected using the drop-down box.
- This certifies that the STT government will assume the applicable non-federal cost share.

BOX 15: LIST OF ENCLOSURES AND SUPPORTING DOCUMENTATION

Check the appropriate boxes for all supporting documents included with the request form. If an attachment is not among the listed boxes, check the “Additional Supporting Documentation” box and add a brief description.

<input type="checkbox"/> Cover Letter	<input type="checkbox"/> Enclosure A (Individual Assistance)*	<input type="checkbox"/> Enclosure B (Public Assistance)*
<input type="checkbox"/> Enclosure C (Requirements for Other Federal Agency Programs)	<input type="checkbox"/> Enclosure D (Historic and Current Snowfall Data)	
<input type="checkbox"/> Additional Supporting Documentation	<input type="text"/>	

- Cover Letter
- Enclosure A is required if Individual Assistance is being requested. *
- Enclosure B is required if Public Assistance is being requested. *
- Enclosure C is required if there are requirements for OFA programs.
- Enclosure D is required if there is a request for snow assistance.
- List all additional supporting documentation that will be included with the request (e.g., National Weather Service weather report)

* Enclosures A and B are not required for an emergency declaration request.

SIGNATURE

Sign the space for the governor’s/Tribal Chief Executive’s signature and enter the date of request. A date can be entered manually or by using the drop-down calendar to select a date. This date should match the date in Box 1.

- Note: If anyone other than the governor/Tribal Chief Executive signed the request form, documentation must be provided that establishes that person’s legal authority to act on behalf of the governor/Tribal Chief Executive.