



BRIAN TAYLOR
STATE FIRE MARSHAL

Rostering Requirements and Reimbursement Rules

A rostered resource is defined as a department that has entered deployment information into the Office of State Fire Marshal Resource Entry and Deployment System (REDS).

Must have the Chief or Agency Head approval to be a rostered resource.

Rostering your department is not a deployment order! It is just a notification to OSFM that a resource is available for deployment. No self-dispatch of personnel or apparatus, if you are not deployed with a mission number and mission assignment paperwork you will be asked to leave the area.

Before you roster your agency for deployment, please contact your county Emergency Management and Fire Marshal and advise them you are rostering. Counties may not want you to roster if you are in area that may be impacted.

You must list your County Emergency Manager and Fire Marshal when you roster as a deployable resource to ensure they are aware you have rostered. You will need to follow the procedure your jurisdiction has set forth to deploy resources.

All personnel who are rostered must meet the requirements for the mission that the unit is being deployed for in accordance with the Authority Having Jurisdiction.

Once rostered, your agency County Emergency Management, and Fire Marshal will be emailed a verification that your agency is rostered. DO NOT call and ask when you are going to be deployed!

As missions are requested, the OSFM REDS will notify agencies of a deployment with specific instructions and necessary deployment information. Do not deploy without the e mail from the OSFM REDS system.

All units deployed must have VIPER capability.

No equipment purchased will be reimbursed unless approved by NCEM!

Only send equipment and personnel that are rostered and on the mission assignment.

Volunteer personnel are not eligible for hourly reimbursement.

Equipment is only eligible for the hours it used during the deployment and not for the total amount of time it is deployed.

The hourly rate that is approved by FEMA is inclusive of all reimbursable expenses for the unit. Additional reimbursements will not be allowed for fuel, oil changes, or other costs associated with normal use.

If equipment is damaged, OSFM needs to be notified immediately and documented on the 214's. If this documentation does not occur while deployed, it will not be eligible for reimbursement.

No reimbursement for units that are not deployed as a part of an approved mission with a mission number in Web EOC.

All forms for reimbursement are attached below.



Reimbursement Guide

Cover Letter

(Ensure your cover letter has all the information listed below)

- WebEOC Number
- Reimbursement Amount
 - o Breakdown of Costs(labor, equipment, material)
- Tax ID
- Who to pay
- Point of contact

Cost Summary Roll up sheet

- This will be auto generated as information is inputted throughout the workbook.
 - o Do NOT create your own formulas as they are already generated throughout.

Benefits Calculation Sheet

- This sheet is necessary if you are claiming benefits for your employees; if no benefits are applicable do not worry about completing sheet.

Force Account Labor Record

- This is where you document the hours your employees worked while deployed.
 - o Input the employees name
 - Volunteers **CAN NOT** be reimbursed unless otherwise suggested in Department/Organizations Pay Policy.
 - o Input the hours they worked on the given day (total hours will be auto populated)
 - Input Hourly Rate
 - Input Benefits Rate (if applicable)
 - o Once these steps are followed you will have a **Total Cost for Labor** represented at the top right of the Sheet. This is all that needs to be done, the document will auto-populate everything for you on the Cost Summary Roll up Sheet.
- Along with the Labor Record, I will need **Supporting Documentation** for the employees, this comes in the form of :
 - o Pay stubs for time of deployment, this is to verify that employees have been paid.
 - o Timesheets (if possible) of the hours worked during the deployment.
 - o Pay Policy Memo if claiming overtime. This will help finance understand how your department pays overtime. This is also used to specify if Department/Organizations have pay allocation for volunteers.

Force Account Equipment Record

- This is where you document equipment usage.
 - o Input the piece of equipment used
 - o Input the operators name
 - Input the FEMA Equipment Code (<https://www.fema.gov/schedule-equipment-rates>)



- This will establish the price of reimbursement per mile/per hour
- Under the unit column please input Mile/Hour based on equipment rate used.
 - **NOTE: This is a dropdown box.**
- Once these steps are followed you will have a **Total Cost for Equipment** represented at the top right of the Sheet. This is all that needs to be done, the document will auto-populate everything for you on the Cost Summary Roll up Sheet.
- Along with the Equipment Record, I will need **214's/ supporting documentation** to support the hourly claims for the equipment.
 - **NOTE: Our Finance Department is strict on equipment usage and documentation. If you do not have documentation to represent the exact time usage of the equipment claimed, you will NOT be reimbursed for it.**
 - **Please ensure that if you claim 24 hours, that our finance team will be able to find 24 hours of usage within the documentation provided. This does NOT include time spent in staging.**
- Time spent in staging is **NOT REIMBURSABLE.**

Force Account Materials Record

- This is where you document food/room and board.
 - **NOTE: No fuel can go on this section as fuel is accounted for through the FEMA equipment rates used on the Force Account Equipment Record.**
- If you choose to reimburse any food or lodging, please provide a receipt of the purchase.
 - If the food purchase is excessive, please provide a roster.
- If you have damaged equipment, please put it in this section.
 - Provide a short memo as to how it was damaged while deployed.
 - Provide an invoice for the replacement part.

Direct Administration Cost

- This allows you to be reimbursed for the time needed to create the Reimbursement Request.
 - **NOTE: This section is ONLY labor.**

W9 Form

- Please submit an up to date W9 form.

EOC Mission Tasking

- Please attach the Mission Tasking for which your department was assigned.
 - **Note: This is not the Disaster Number. This is the Mission Number assigned via WebEOC.**



**OFFICE OF STATE
FIRE MARSHAL**
NC DEPARTMENT OF INSURANCE

Enter Department Name/Address Here

Month Day, Year

Brian Barnes
NC Department of Public Safety
Division of Emergency Management
1636 Gold Star Drive
Raleigh, NC 27607

Re: (Event) Response Support

Please find enclosed documentation for the reimbursement of **xxxx (Department name)** for expenses incurred in support of emergency protective measures and the response to (Event), **xxxx (dates of operation)**. **xxxx (Brief explanation of deployment order)**. The assignment was tasked in WebEOC as Mission number **xxxx (WebEOC # (6 digit number))**

The total reimbursement requested is \$**xxxx (total amount)** This amount is comprised of the following;

\$ xxxx	personnel
\$ xxxx	materials
\$ xxxx	equipment

xxxx (name of department), Inc Tax Id is **xxxx**.

Please remit payment to:
(enter address here)

If you have any questions, please feel free to contact **xxxx (name)** at **xxxx (contact number)**

OFFICE OF STATE FIRE MARSHAL

1202 MAIL SERVICE CENTER | RALEIGH NC 27699 -1202 | TEL 919.647.0000 | FAX 866.851.6508 | NCOSFM.GOV



Reimbursement Request Checklist

- ☐ **Cover Letter** – Ensure the following information is listed in your Cover Letter:
 - ☐ Agency Letterhead
 - ☐ WebEOC Number
 - ☐ Reimbursement Amount
 - ☐ Breakdown of Costs (Labor, Equipment, Material)
 - ☐ Tax ID #
 - ☐ Who to pay
 - ☐ Point of Contact (phone and/or email)
- ☐ **Cost Summary Roll Up Sheet**
 - ☐ Signed and dated
- ☐ **Benefits Calculation Worksheet**
 - ☐ Signed and dated
- ☐ **Force Account Labor Record**
 - ☐ All boxes filled out in upper right hand corner.
 - ☐ Memo explaining Pay Policy.
 - ☐ Time sheets for all employees seeking reimbursement.
 - ☐ Pay Documentation reflecting payment for time documented.
- ☐ **Force Account Equipment Record**
 - ☐ All boxes filled out in upper right hand corner.
 - ☐ Make sure there are 214's/documentation for each piece of equipment used.
 - ☐ Can only be reimbursed for actual time running, STAGING DOES NOT APPLY.
- ☐ **Force Account Materials Summary** - Cannot claim reimbursement for fuel, this is included in FEMA equipment rate.
 - ☐ Documentation of Meals Purchased
 - ☐ If meal purchases are excessive, please provide a roster of those who took part.
 - ☐ Documentation of Lodging Purchased
 - ☐ Documentation of Damaged Equipment
 - ☐ Need memo of explanation of what happened and why it needs to be repaired or replaced
 - ☐ Invoices needed for damaged equipment
- ☐ **Direct Administrative Costs**
 - ☐ Administrative time is not duplicated on Force Account Labor Record.
- ☐ **EOC Mission Tasking**



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☐ **W9 Form**
Notes



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