



# FEMA

## Frequency Authorization Request Form

**Organization:**

**Date of Request:**

**Mailing Address:**

**Point of Contact:**

**Email Address:**

**Office Phone:**

**Mobile Phone:**

**Start Date:**

**End Date:**

**Group Requesting Spectrum: (ex. PA-TF1, Frederick-MERS, IMAT-East, other, etc.)**

**Communications equipment being used (Transmitter / Receiver Information, Power, Antenna, etc.)**

**Requesting Spectrum (HF/VHF/UHF/Specify Other):**

**Physical Address of Transmitting Location / Deployment Operations Location:**

**Site Latitude: dd mm ss (ex. 39 10 34 N)**

**Site Longitude: dd mm ss (ex 078 10 14W)**

**Frequency Request Extra Notes (Support details / Specific Channels, Zones, Band, etc.)**



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Email the completed request form, located on page two, to the following: [FEMA-Frequency-Office@fema.dhs.gov](mailto:FEMA-Frequency-Office@fema.dhs.gov), [Homero.Ruizjr@fema.dhs.gov](mailto:Homero.Ruizjr@fema.dhs.gov), and [Richard.Caschera@fema.dhs.gov](mailto:Richard.Caschera@fema.dhs.gov). All routine request must be received and confirmed delivery as best as possible 45 days in advance of the estimated / planned start date. All Urgent / Real Mission requests are handled on case-by-case basis. If request needs answered after standard business hours, please give either Spectrum Manager a call.

**Do not write below this line. For FEMA Spectrum Manager use only.**

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Status:

Date:

FEMA Spectrum Manager Comments:

FEMA Spectrum Manager



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### Instructions for using FEMA Frequency Authorization Request Form:

Please fill out as completely as possible all fields listed on this document. You will find the contact information for both FEMA Spectrum Managers and Spectrum Management Office. For your convenience we have defined some common terms to assist in the completion of the FEMA Frequency Authorization Request Form. As always, please let us know if you have any questions, comments, or concerns with your request. We are all one team and here to help make your mission successful as possible.

**Organization** – Self Explanatory

**Mailing Address** – This is the mailing address of YOUR Organization

**Point of Contact (POC)** – Someone with the technical knowledge of this request and/or operationally supporting the frequencies and equipment during the mission (normally lead COML or MERS MECO).

**Phone / Email** – Point of contact information where we can get a hold of you if interference is presented to our office or clarifications are required.

**Start and End Dates** – Enter both the anticipated/planned start dates of the event and estimated end dates. Active disasters may not have a known end date; FEMA Spectrum Management Office will interpret all disaster deployments a month long and can issue extensions to request if required.

**Equipment Specifications** – Type of transceiver / receiver, power out, antenna type, antenna height above ground (AGL), and estimated radius of operation. If no antenna height is provided, we will interpret the height to be ground / standard truck roof level.

**Requested Operating Frequencies / Band** – HF/VHF/UHF/Specific channel if known.

**Physical Address of Equipment** – Location of where you will be operating and/or estimated deployment location if known. Important to communicate by phone and email changes of location over 80 km.

**Latitude / Longitude** – Required format is reporting in Degrees, Minutes, and Seconds. Be sure physical address and latitude/longitude match.

**Additional Comments/Notes** – Free text area to allow input, justification, or any other comments to help or assist us in turning around your frequency requests. For all FEMA Channels, please don't assume that they are cleared and available to support trainings, exercise, missions etc.