



Daily Unmanned Equipment Usage Log



Purpose

This form will record the daily event-related work performed by unmanned equipment (such as generators and water pumps) along with the time spent in use. The Applicant will need to supplement this form with the operator's labor hours.

Fields

- Event Name: Type of event, Number, Name of Event if known will be entered.
- Applicant Name: Name of Applicant will be entered.
- Date: Enter the date the form was completed.
- Equipment Location: Enter the geographical area at which the unmanned equipment is performing event related work (this could include coordinates, general areas of a given municipality, cross streets, etc.)
- Purpose of Equipment: Enter the specific event related work that the unmanned equipment is to perform
- Type of Equipment: Enter the main functionality of the equipment, the year the equipment was manufactured, the manufacturer, company, or name of the equipment, the name that represents the given size and shape of the equipment, and the capability or dimensions of effort that the equipment is able to perform as appropriate
- Equipment ID: Unique ID number assigned by workplace
- FEMA Cost Code: Enter the number associated with make, model, year, and type of equipment from the FEMA Equipment Rate Sheet applicable to the event.
- Date: Enter the date on which the unmanned equipment performed the event related work
- Start Time: Enter the start time the unmanned equipment began to perform event related work
- Usage Hours: Enter the total number of hours the unmanned equipment was used, beginning with the "Time" input for each date
- Employee Name: First and Last Name of the employee that is responsible for monitoring the unmanned equipment

To access FEMA's latest equipment rates, click here:

<https://www.fema.gov/assistance/public/tools-resources/schedule-equipment-rates>





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Employee Name: _____ Applicant Name: _____

Event Name: _____ Date: _____

Start Time	Equipment Location	Usage Hours	Equipment ID	Equipment Name	Make/Model	FEMA Cost Code

