



Lehigh Emergency Services

Training Academy

640 W Hamilton St, 8th Floor Allentown PA 18101
(610) 799-1101 lesta@lehighcounty.org

Contact Information

Contact Name	Title	Organization
County	Municipality	Phone No
Fax No	E-mail Address	

Requesting Assistance - Requested Resources

Mission Name

Detailed Description of Capability Requested

LESTA Internal Review

Area Office Notification / Concurrence	Date / Time Notified
Approved By	Signature
Comments	

Delivery Location - Requested Resources

Delivery Site Name	
Delivery Site Address	
Delivery Site POC Name	Delivery Site POC Email
Delivery Site POC Phone	Delivery Site Alternate Phone

****NOTE** The organization requesting the equipment will be responsible for picking up the requested resource as well as returning it to the training site it was picked up from.**

Comments

Requestor Acknowledgement

By signing below, I, the requestor, acknowledge and understand that I will assume full responsibility for the care and maintenance of the requested resource. I understand and acknowledge that there may be costs associated with requesting the resource as well as maintaining the equipment. I also acknowledge that the requesting organization will pick up and return LESTA owned equipment to the training site it was procured from.

Signature

Printed Name

Date