**Attachment 1: SSEER Work Order Template**

**Principal Investigator**:

**Department & Title:**

**E-mail & Phone**:

**Scope of work.** Provide a brief statement of work to be conducted.

**Deliverable**s: Provide a clear statement of the data, information, maps, samples, services, etc. to be obtained and delivered to the DEM Emergency Response Administration or designee.

**Budget**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Personnel Cost |   |   |   |   |
| Name | Title | Hrly Rate | Hours | Total |
|   |   |   |   |   |
|   |   |   |   |   |
|   |   |   |   |   |
| Transportation and Supplies |   |   |   |   |
| Item | Description | Unit Rate | Units | Total |
| Vessel |   |   |   |   |
|   |   |   |   |   |
| Travel |   |   |   |   |
|   |   |   |   |   |
| Equipment |   |   |   |   |
|   |   |   |   |   |
| Supplies |   |   |   |   |
|   |   |   |   |   |
|  |  |  | TOTAL |   |

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**Principal Investigator**  Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**RI DEM Emergency Response Administrator** Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**URI Coastal Institute**  Date