

MUNICIPAL RISK REDUCTION AND DISASTER MANAGEMENT OFFICE

External Services



1. EMERGENCY RESPONSE

| Office or Division: | Municipal Mayor - | Municipal Mayor - Municipal Disaster Risk Reduction Management Office | | |
|---|---|---|--|--|
| Classification: | Simple | Simple | | |
| Type of | GOVERNMENT TO | GOVERNMENT TO CLIENT | | |
| Transaction: | | | | |
| Who may avail: | | All residents of Santol and non-residents needing emergency services | | |
| | within the area of r | esponsibility of S | | |
| | REQUIREMENTS | | WHERE TO SEC | URE |
| None | | None | T == = = = = = = = = = = = = = = = = = | |
| CLIENT STEPS | AGENCY ACTIONS | FEES TO BE PAID | PROCESSING TIME | PERSON RESPONSIBLE |
| 1. Call the MDRRMO hotline 0917-7302412 (G) 0947-8640176 (S) None | 1.1 Receive the emergency call 1.2 Inquire the name of informant/caller, place of incident and other details 1.3 Assess the veracity & seriousness of the reported incident | None | 2 minutes | LDRRMO II Administrative Aide I MDRRM Office |
| None | 1.4 Deployment of required responder/s | None | 2 minutes | LDRRMO II Administrative Aide I MDRRM Office |
| None | 1.5 Deployment and response proper | None | 3 minutes | Emergency Response Team MDRRM Office |
| None | 1.6 Provide feedback on the arrival of the responder/s | None | 2 minutes | LDRRMO II Administrative Aide I MDDRM Office |
| | Total | None | 9 minutes | |



2. REQUEST FOR TRAININGS/DRILL/LECTURES

| Office or Division: | Municipal Mayor - Municipal Disaster Risk Reduction Management Office | | | | |
|---|---|--------------------|-----------------------|--|--|
| Classification: | Simple | Simple | | | |
| Type of Transaction: | GOVERNMENT TO CLIENT | | | | |
| Who may avail: | All residents of Santol and non-residents needing emergency services within the area of responsibility of Santol. | | | | |
| CHECKLIST OF | REQUIREMENTS | WHERE TO SECURE | | | |
| None | | None | | | |
| CLIENT STEPS | AGENCY ACTIONS | FEES TO BE PAID | PROCESSIN G TIME | PERSON RESPONSIBLE | |
| 1. Submit request letter addressed to the Municipal Mayor (attention to Gerone F. Navaera, LDRRMO II) | 1.1 Receive request letter | None | 5 minutes | Administrative Aide I MDRRM Office | |
| None | 1.2 Classification and assessment of training required 1.3 Act on the request upon availability of schedule | None | 1 hour | LDRRMO II MDRRM Office | |
| None | 1.4 Review of training design (in case provided for) and coordination with concerned government agency/ies | None | 1 day | LDRRM Office Admin. And Training Staff MDRRM Office | |
| None | 1.5 Prepare training materials needed if necessary | None | 1 day | LDRRM Office Admin. And Training Staff MDRRM Office | |
| 2. Receive feedback of the status of the request | 1. Inform the requesting entity of the status of their request | None | 5 minutes | LDRRM Office Admin. And Training Staff MDRRM Office | |
| | Total | None | 2 days and 70 minutes | | |



3. REQUEST FOR EDUCATION INFORMATION CAMPAIGN (IEC) MATERIALS

| Office or Division | | Municipal - Mayor Municipal Disaster Risk Reduction Management | | |
|-------------------------|---------------------------------|--|----------------------|------------------------------------|
| Classification: | Simple | Office Simple | | |
| Type of | | GOVERNMENT TO CLIENT | | |
| Transaction: | COVERNIMEN | GOVERNIMENT TO GETEIN | | |
| Who may avail: | All residents of | All residents of Santol and non-residents needing emergency services | | |
| | within the area | within the area of responsibility of Santol. | | |
| CHECKLIST OF | REQUIREMENTS | | WHERE TO SEC | URE |
| None | | None | | |
| CLIENT STEPS | AGENCY ACTIONS | FEES TO BE PAID | PROCESSIN G TIME | PERSON RESPONSIBLE |
| 1.Submit request letter | 1.1 Receive request letter | None | 5 minutes | Administrative Aide I MDRRM Office |
| addressed to | . roquost rotto. | | | |
| the Municipal | | | | |
| Mayor (attention | | | | |
| to Gerone F. | | | | |
| Navaera, | | | | |
| LDRRMO II) None | 1.2 | None | | LDRRM Officer |
| None | Identification/classif | INOTIE | | Research and |
| | ication of IEC | | | Planning Staff |
| | materials being | | | MDRRM Office |
| | requested | | | |
| | | | 1 day | |
| None | 1.3 Coordination with concerned | None | | |
| | department for the | | | |
| | preparation of IEC | | | |
| | materials needed | | | |
| 2. Receive | 1.Inform the | None | 1 day | LDRRM Officer |
| feedback of the | requesting entity of | | | Research and |
| status of the | the status of their | | | Planning Staff MDRRM Office |
| request | request | NI | 0 1 | INIDIVINI OIIICE |
| | Total | None | 2 days and 5 minutes | |



4. REQUEST FOR VEHICLE ASSISTANCE

| Office or Division: | Municipal Mayor - | Municipal Mayor - Municipal Disaster Risk Reduction Management Office | | | |
|---------------------|----------------------|---|------------|-------------------------------------|--|
| Classification: | Simple | Simple | | | |
| Type of | GOVERNMENT T | GOVERNMENT TO CLIENT | | | |
| Transaction: | | | | | |
| Who may avail: | All residents of Sa | All residents of Santol and non-residents needing emergency services | | | |
| | | within the area of responsibility of Santol. | | | |
| CHECKLIST OF | REQUIREMENTS | WHERE TO SECURE | | | |
| None | | None | | | |
| CLIENT STEPS | AGENCY ACTIONS | FEES TO BE | PROCESSING | PERSON | |
| OLILIAI OILI O | AGENOT ACTIONS | PAID | TIME | RESPONSIBLE | |
| 1.Call the | 1.1 Receive the call | None | 2 minutes* | LDRRMO II | |
| MDRRMO hotline | | | | MDRRM Office | |
| 0917-7302412 (G) | 1.2 Inquire the name | | | Administrative Aide I MDRRM Office | |
| 0947-8640176 (S) | of caller, address | | | IVIDARIVI OTTICE | |
| | and other details | | | | |
| None | 1.3 Coordinate to | None | 5 minutes | LDRRMO II | |
| | the concerned | | | MDRRM Office | |
| | department/section | | _ | Operations and Warning Staff | |
| None | 1.4 Determine the | None | 5 minutes | MDRRM Office | |
| | availability of the | | | WETTAN OTHER | |
| | vehicle being | | | | |
| 0.0 | requested | | | 1.000040.11 | |
| 2. Receive | 1. Inform the | | 5 minutes | LDRRMO II MDRRM Office | |
| feedback of the | requesting entity of | | | Operations and | |
| status of the | the status of their | | | Warning Staff | |
| request | request | | | MDRRM Office | |
| | TOTAL | None | 15 minutes | | |