REOUESTING ASSISTANCE FORMAT

Co-op Requesting Assistance: Lee County Electric Cooperative, Inc. (LCEC)	
Co-op Contact Informat	tion
Name: (TBD)	
Direct phone(s): <u>(TBD)</u>	
Email: <u>(TBD)</u>	Fax: <u>(TBD)</u>
Highest Gloving Voltage	24.9/14.4 kV
The Number of Each Ty	pe of Crew: (see definitions on pages 10-11)
Construction	600 Min
Service Bucket	300 Zucludes 40-50 General Foreman / Supervisors
Underground	100 Mex
Right-of-way	184 - Includes 18-20 Bilingual General Foremen
OTHER EQUIPMENT	AND TOOLS: <u>Swamp terrain vehicles (track, floatable)</u> & Back & and Machines
THE NUMBER OF OT Mechanic Substation Supervisor Dispatcher Public Relations Clerical	HER PERSONNEL NEEDED: Staking Engineer Meterperson Warehouse Manager Warehouse Helper Equipment Operator Other
Critical materials needed	None
Estimate of how long hel	p may be needed: <u>Two weeks (fourteen days)</u>
Work and weather condit	ions: <u>Generally hot & humid.</u> Sporadic rain/thunderstorms.
Road conditions: Gener	ally clear with periodic debris and/or flooding.
Where to report: (TBD)	
Whether cots and beddin	g are required: <u>No.</u>

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