

COOP Interdependency Tool

Agency:

State EF Number:

Essential Function:

Does your agency depend on any other state agencies in order to perform this essential function? ___ Yes ___ No

If yes, please fill out the form below.

Which state agency do you depend on?	What essential support is provided?	What does the essential support do?	What is the potential negative impact?	In hours, what is the RTO?