DAMAGE ASSESSMENT

FILL OUT IN ROUTE TO STAGING

DATE: / /	PERSON REPORTING:	PAGE #: of
TIME RECEIVED:	PERSON RECEIVING:	

		BURNING	OUT	GAS LEAK	H2O LEAK	ELECTRIC	CHEMICAL	DAMAGED*	COLLAPSED	INJURED	TRAPPED	DEAD	ACCESS	NO ACCESS	ASSIGNMENT COMPLETED
TIME	**LOCATION/ADDRESS**	**FIRES**		**HAZARDS**				**STRUCTURES**		**PEOPLE**			**ROADS**		**/ X**

Summary of all hazards in area - fill out this form on your way to Command Post and give it to Incident Command.

(* for structure damage: H = heavy, M = moderate, L = light)

Incident Command: Choose an incident, put a slash in the assignment completed column, copy the address/location to the incident name section on Incident Briefing, and give Incident Briefing and Assignment Status to incident team leader. Copy address/location to Post-Incident Status and enter start time. When incident is complete, put a backslash in the assignment completed column and the incident end time on the Post-Incident Status form.