DAMAGE ASSESSMENT

Date:	Person Reporting:	Page #:
Time Received:	Person Receiving:	

Time	Location/Address	Fires		Hazards				Structures		People			Roads		/X
		Burning	Out	Gas Leak	H2O Leak	Electric	Chemical	Damage*	Collapsed	Injured	Trapped	Dead	Access	No Access	Assignment Completed

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.

DAMAGE ASSESSMENT

Date:	Person Reporting:	Page #:
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		Fires		Hazards				Structures		People			Roads		/X
Time	Location/Address	Burning	Out	Gas Lead	H2O Lead	Electric	Chemical	Damage*	Collapsed	Injured	Trapped	Dead	Access	No Access	Assignment Completed
0945	13267 Magnolia				X	X		M							X

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