

RECONNAISSANCE REPORT

LINE #	ITEM	EXPLANATION	DATA (circle the applicable color)
1	CITY OF LOS ANGELES	Name of the city submitting the report	
2	INFRASTRUCTURE	General status of facilities such as dams, disaster routes, freeways, airports, flood control system, utilities, high occupancy structures, within your jurisdiction.	GREEN AMBER RED BLACK
3	HOSPITALS	General status of private and County hospitals. It does not apply to small medical facilities or clinics. ONLY HOSPITALS.	GREEN AMBER RED BLACK
4	FIRE/RESCUE	General status of supporting fire /rescue service whether city owned or contracted service.	GREEN AMBER RED BLACK
5	LAW ENFORCEMENT	General status of supporting law enforcement agency whether city owned or contracted service.	GREEN AMBER RED BLACK
6	COMMUNICATIONS	Status of city operated communications systems. NOT COMMERCIAL SYSTEMS (Pac Bell, GTE, Etc.).	GREEN AMBER RED BLACK
7	STATUS OF GOVERNMENT	How well is the city government able to respond to the emergency.	GREEN AMBER RED BLACK
MSG 4	SOURCE NAME	Used to name the person who provided the report to the Operational Area.	
MSG 4A	SOURCE PHONE #	Phone number of the person who provided the report to the Operational Area.	
MSG4 B	SOURCE FAX #	Fax number of the person who provided the report to the Operational Area.	

GREEN = Fully Operational
 AMBER = Some Reductions in Service
 RED = Emergency Services Only
 BLACK = Incapable of Providing Services

GENERAL AREA SURVEY SUMMARY REPORT

REPORTING DISTRICT	SUM	STRUCT DAMAGE	NEED FOR				COMMENTS
			USAR	MED EVAC	COR-ONER	SHELTER	

NOTE: Use as many additional lines as there are Reporting Districts in the Jurisdiction.

EXPLANATION OF THE DATA FIELDS IN THE FORM

REPORTING DISTRICT = Police Patrol District

SUM = A color code that provides an overall summary for the Reporting District.

ROADS & BRIDGES = A color code that summarizes damage to roads and bridges within the Reporting District.

STRUCT DAMAGE = A color code that summarizes structural damage for the Reporting District. USAR = A color code that describes the need for Urban Search & Rescue within the Reporting District. MED EVAC = A color code that describes the need for Medical Evacuation within the Reporting District. CORONER = A color code that provides the Coroner with information on how to deploy staff.

SHELTER = A color code that describes the need for temporary shelter within the Reporting District.

COMMENTS = Optional free text field for use if any very brief comments or explanation is necessary.

EXPLANATION OF THE COLOR CODES USED ON THE FORM

COLOR FOR SUMMARY

GREEN = Area shows little sign of apparent impact from the disaster.

AMBER = There are signs of impact. Both people and structures. Impact appears minor.

RED = There are major problems in this Reporting District.

BLACK = The Reporting District shows sever signs of damage and life threatening situations caused by the disaster.

COLOR FOR DAMAGE

??? = Status unknown or could not be determined.

GREEN = Less than 10% of structures or systems appear impacted.

AMBER = Between 10% & 25% of structures show visible damage or utilities appear inoperative.

RED = More than 25% visible damage including 10% collapsed.

BLACK = More than 50% visible damage including 20% collapsed.

COLOR FOR NEEDS

??? = Status unknown or could not be determined.

GREEN = No support needed.

AMBER = There is a need but it can be handled by jurisdictional assets or normal mutual aid.

RED = There is a need and major mutual aid will be required.

BLACK = There is a need and the jurisdiction can not handle the problem at all.

GENERAL AREA SURVEY REPORT

(This is a field paper report format to be filled out by the person checking the area. The report is sent to the EOC where it is compiled into a General Area Survey Summary Report)

Line No.	ITEM	EXPLANATION	DATA (Circle the appropriate color)
1	TYPE REPORT	Indicate whether a city report or a county unincorporated area report.	
2	DATE OF REPORT	The effective date (MM/DD/YYYY) of the report. EMIS must have a four digit year.	
3	TIME OF REPORT	The effective time (HH:MM - Colon must be used between HH & MM) of the report. This is in military time using the 24 hour clock but when it is entered into EMIS there must be a colon between hours and minutes.	
4	AREA NAME	If a city, the city name. If a county unincorporated area, the name of the reporting Sheriff Station.	
5	PUBLIC SAFETY REPORTING DISTRICT NAME	The unique identifier used by the jurisdiction to identify the reporting district.	
6	SUMMARY	A color code indicating the general overall condition of the reporting district. Very subjective. See description of color codes below.	GREEN AMBER RED BLACK
7	ROADS AND BRIDGES	A color code indicating the existence of damage to the road and bridge network in the area that impacts movement. Very subjective. See description of color codes below.	GREEN AMBER RED BLACK
8	STRUCTURAL DAMAGE	A color code indicating damage. Very subjective. See description of color codes below.	GREEN AMBER RED BLACK
9	NEED FOR		
9a	URBAN SEARCH & RESCUE SUPPORT	A color code indicating the need for USAR support. Very subjective. See description of color codes below.	GREEN AMBER RED BLACK
9b	MEDICAL EVACUATION	A color code indicating the need for medical evacuation. See description of color codes below.	GREEN AMBER RED BLACK

DAMAGE ASSESSMENT ANNEX- FORMS

Line No.	ITEM	EXPLANATION	DATA (Circle the appropriate color)
9c	CORONER ASSISTANCE	A color code indicating the need for Coroner assistance for recovery of multiple fatalities. Very subjective. See description of color codes below.	GREEN AMBER RED BLACK
9d	SHELTERING	A color code indicating the need for establishment of temporary shelters to care for residents impacted by the disaster. Very subjective. See description of color codes below.	GREEN AMBER RED BLACK
10	COMMENTS	Free text area any brief comments the reporting feels will enhance knowledge of the impact the disaster has had on the reporting district.	

EXPLANATION OF GENERAL AREA SURVEY COLOR CODES

COLOR FOR SUMMARY

GREEN = Area shows little sign of apparent impact from the disaster.

AMBER = There are signs of impact. Both people and structures. Impact appears minor.

RED = There are major problems in this Reporting District.

BLACK = The Reporting District shows sever signs of damage and life threatening situations caused by the disaster.

COLOR FOR DAMAGE

??? = Status unknown or could not be determined.

GREEN = Less than 10% of structures have visual damage.

AMBER = Between 10% & 25% of structures show visible damage.

RED = More than 25% visible damage including some collapsed.

BLACK = More than 50% visible damage including many collapsed.

COLOR FOR NEEDS

??? = Status unknown or could not be determined.

GREEN = No support needed.

AMBER = There is a need but it can be handled by jurisdictional assets or normal mutual aid.

RED = There is a need and major mutual aid will be required.

BLACK = There is a need and the jurisdiction can not handle the problem at all.

CITY STATUS REPORT

NOTE: When sending in an update report, only those line items with changes need to be provided.

LINE #	ITEM	EXPLANATION	DATA
1	CITY	Name of city submitting the report.	
2	EVENT	The event that has caused the emergency. For example "Northridge Earthquake". By the time the first City Status Reports are sent, EMIS will have a name for the event and that name MUST be used. It will be available at the EMIS data entry point.	
3	SENDER'S JOB	This is input automatically by the computer system when the data is being keystroked into the system. Filling out a non-EMIS paper report does not require this data field.	
4	PUBLIC DOLLAR LOSS	An estimate of the dollar value of damage and destruction to government owned (local, County, State, Federal) structures. This includes roads, bridges, etc., as well as buildings. This is an estimate that gets revised up or down daily based on further refinement of the data. It is expected that initial estimates will be very imprecise.	
5	PRIVATE DOLLAR LOSS	An estimate of the dollar value of damage and destruction to privately owned structures. It is expected that initial estimates will be very imprecise.	
6	CASUALTIES - AMBULATORY	Number of injured who can walk.	
7	CASUALTIES - NON AMBULATORY	Number of injured who can not walk.	
8	FATALITIES	Number of city ESTIMATED fatalities. The Coroner is the only source for official death figures.	
9	WIND DIRECTION	As a named compass direction. For example NORTHWEST or SOUTH, etc. Give for the reporting location.	
10	WIND SPEED	In miles per hour. Give for the reporting location.	
11	COMMUNICATIONS SYSTEMS (Operational or Non Operational)		
11a	Fire	Status (Operational or Non Operational) of fire radio systems and a primary contact frequency	
11b	Law	Status (Operational or Non Operational) of law enforcement radio systems and a primary contact frequency.	

DAMAGE ASSESSMENT ANNEX- FORMS

LINE #	ITEM	EXPLANATION	DATA
11c	Public Works	Status (Operational or Non Operational) of Public Works radio systems and a primary contact frequency.	
11d	Other Govt. Radio	Status (Operational or Non Operational) of other government radio systems and a primary contact frequency.	
11e	EOC Contact Frequency	Status (Operational or Non Operational) of EOC radio systems and a primary contact frequency.	
11f	EOC Contact Telephone Number	Status (Operational or Non Operational) of EOC phone system and a primary contact phone number.	
11g	Disaster Communications Service	Status (Operational or Non Operational) of Disaster Communications Service (registered amateur radio operators) radio systems and a primary contact frequency.	
11h	City Government Phone System	Status (Operational or Non Operational) of government owned and operated telephone systems.	
12	UTILITIES (Operational or Non Operational.)		
12a	Public Phone System	Status (Operational or Non Operational) of the commercial phone systems used by the public.	
12b	Electric Power	Status (Operational or Non Operational) of electrical power systems used by the public.	
12c	Gas	Status (Operational or Non Operational) of natural gas systems used by the public.	
12d	Water	Status (Operational or Non Operational) of water systems used by the public.	
12e	Sewage	Status (Operational or Non Operational) of sewage systems used by the public.	
13	STATUS OF GOVERNMENT		
13a	EOC ACTIVATED	Is the city EOC currently activated. YES or NO.	
13b	EMERGENCY DECLARED	Has the city declared a local emergency. YES or NO.	
14	COMMENTS	This is a free text area for giving a short, concise overview of the impact the emergency/disaster is having on the city.	
15	PROGNOSIS	This is a free text area for the city to indicate the general overall recovery probabilities based on the current situation and projected situation.	
16	INFORMATION FROM CITY REPRESENTATIVE	Name of person at the city who has provided the data to the County.	

DAMAGE ASSESSMENT ANNEX- FORMS

LINE #	ITEM	EXPLANATION	DATA
17	DATE	The effective date (MM/DD/YYYY) of the report. EMIS must have a four digit year.	
18	TIME	The effective time (HH:MM - Colon must be used between HH & MM) of the report. This is in military time using the 24 hour clock but when it is entered into EMIS there must be a colon between hours and minutes.	
19	INCIDENT (May have as many separate incidents as needed in a given City Status Report.)		
19a	LOCATION	Pick List of: Street Address, or Cross Street, or Land Mark, or Thomas Bros. Page & Grid (preferred - it will always post to the EMIS electronic map. Indicate which of the above location means are being used. Then provide the location using the appropriate means.	
19b	INCIDENT	This must be an incident from the attached list of EMIS incidents. If you do not see an incident exactly like the one being reported, pick something close to it. These are the only incidents registered in, or recognized by the County EOC computer system. A further description of the incident can be made in the free text area called MAJOR DAMAGE.	
19c	STATUS	Incident OPEN (an active incident) or CLOSED (all work has been completed and the incident no longer presents a problem). When an existing incident is finished, an updated City Status Report would be sent in closing the incident.	
19d	CHILD OF	If the incident were caused by some other incident, the causing incident would be listed here. The causing incident must be one already created by the city.	
19e	PROBLEMS/MAJOR DAMAGE	A free text area for a short, concise description of what has happened.	
19f	ACTION TAKEN	A free text area for a short, concise description of what the city is doing about the incident. If requesting outside support, so indicate but remember, a separate message or resource request must be sent to actually make the request for support.	

When the report is sent to EMIS, it goes to the data base. There is no need for an address panel.

LA CityRIMS Damage Assessment Report

Reporting District:
Event Name:
Event Date/Time:
Event Number:

Incident Type:

Incident Location/Name

- a. Building/Incident Name:
- b. Address:
- c. Major Intersection:
- d. City/Community:
- e. Zip Code:

Incident Report Date/Time: 06/09/02:44 PM

Lead Agency(s):

Supporting Agency(s):

Incident Commander Name:	ICP Location:
Phone:	FAX Number
Alternate Phone:	Radio Freq and Call Sign:
Pager:	Other:

Overall Status:	Comments:
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ITEM	STATUS	REMARKS
5. Road and Bridge Damage:		
6. Structural Damage:		
7. Estimated # of Fatalities		
8. Casualties/Ambulatory (# of injured who can walk)		
9. Casualties/Non-Ambulatory (# of injured who cannot walk)		
10. Public Dollar Loss		
11. Private Dollar Lose		

12. Environmental Status		
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13. Communications Systems		
a. Fire Radio		
b. Police Radio		
c. Public Works Radio		
d. Other Govt. Radio		
e. EOC Radio/Phones		
f. Disaster Comm. Svcs.		
g. City Govt. Phone Syst.		
14. Utilities		
a. Public Phone System		
b. Electric Power		
c. Gas		
d. Water		
e. Sewage		
15. Declaration of Emergency		
a. Local		
b. State		
c. Federal		
16. Resource Status/Needs		
a. Urban Search and Rescue needed?		
b. Medical Evacuation needed?		
c. Coroner Assistance Needed?		
d. Public Sheltering needed?		

17. Prepared By:

a. Name
d. Agency

g. EOC/DOC Location:

b. Phone:

e. FAX Number

h. Radio Call Sign/Freq:

c. Alternate Number:

f. Pager Number:

i. Other:

SAFETY SURVEY SUMMARY FORM

(Sent by cities to the County Department of Public Works once a day)

1	CITY OF	LOS ANGELES					
	REPORTING DISTRICT (a)	0% (None) (b)	1% to 25% (Light Visible Damage) (c)	26% to 50% (Moderate Visible Damage) (d)	51% to 75% (Heavy Visible Damage) (e)	76% to 90% (Major Visible Damage) (f)	Above 90% (Totally Destroyed) (g)
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							

NOTES:

1. The Percent of Damage columns will have a number representing the number of structures (including roads and bridges) within a Reporting District that have been identified as having that percent damage.
2. Only Reporting Districts that have been previously noted as having damage should be identified in this report.

SAMPLE SAFETY SURVEY REPORT FIELD DATA COLLECTION FORM

(This is a field paper report format to be filled out by the team checking the area. The report is sent to the Jurisdiction's EOC or Public Works/Building and Safety where it is compiled into a Safety Survey Summary Report)

ASSESSOR BOOK INDEX NO. _____

DISASTER CODE # _____

SURVEY TEAM # _____

#	ADDRESS RANGE									ADDRESSES REQUIRING IMMEDIATE EVALUATION															
	STREET (a)	FROM (b)	TO (c)	0% (None) (d)	1% to 25% (Light Visible Damage) (e)	26% to 50% (Moderate Visible Damage) (f)	51% to 75% (Heavy Visible Damage) (g)	76% to 90% (Major Visible Damage) (h)	Above 90% (Totally Destroyed) (g)	ADDRESS (h)						STREET (i)									
1	Ballinger St	18900	18939	12	20	7	6	4	1	1	8	9	2	0	B	a	l	l	l	n	g	e	r		
2	Road Bed				XX					1	8	9	2	5	B	a	l	l	l	n	g	e	r		
3	Ballinger St	18940	18979	22	17	5	3	0	0	1	8	9	3	1	B	a	l	l	l	n	g	e	r		
4	Road Bed			XX																					
5	Ballinger St	18980	18999	18	9	9	7	5	2																
6	Road Bed	18900	18999		XX																				
7																									
8																									
9																									
10																									

NOTE: The top six rows are filled in as an example of how the form can be used. Ideally, the appropriate Assessor Book map page would be attached to the form.

Block _____ Parcel No. _____

ATC-20 Rapid Evaluation Safety Assessment Form (Modified)

BUILDING DESCRIPTION:

Name: _____

Address: _____

No. of stories: _____

Basement: Yes No Unknown

Primary Occupancy: Dwelling

Other Residential Commercial Office

Industrial Public Assembly School

Government Emer. Serv. Historic

Other _____

OVERALL RATING: (Check One)

INSPECTED (Green)

_____ Exterior only

_____ Exterior and Interior

LIMITED ENTRY (Yellow)

UNSAFE (Red)

INSPECTOR:

Inspector ID _____

Affiliation _____

INSPECTION DATE:

Mo/day/year _____

Time _____ am pm

Instructions: Review structure for the conditions listed below. A "yes" answer to 1, 2, 3, or 5 is grounds for posting entire structure UNSAFE. If more review is needed, post LIMITED ENTRY. A "yes" answer to 4 requires posting AREA UNSAFE and/or barricading around the hazard. Hazards such as a toxic spill or an asbestos release are covered by 6 and are to be posted and/or barricaded to indicate AREA UNSAFE.

Condition	Yes	No	More Review Needed
3. Collapse, partial collapse, or building off foundation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Building or story noticeably leaning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Severe racking of walls, obvious severe damage and distress	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Chimney, parapet or other falling hazard <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Severe ground or slope movement present	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Other hazard present	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Recommendations:

No further action required

Detailed Evaluation required (circle one) Structural Geotechnical Other _____

Barricades needed in the following areas: _____

Other: _____

Posted at this Assessment: Yes No

Comments: _____

FACILITY INSPECTION STATUS SUMMARY

LINE #	ITEM	EXPLANATION	DATA
1	TYPE REPORT	Indicate whether a city report or a county unincorporated area report	
2	AREA NAME	If a city, the city name. If a county unincorporated area, the name of the supporting Sheriff Station. The source of this report is county DPW. The supporting Sheriff Station is recorded to provide a geographical reference.	
3	DATE OF REPORT	The effective date (MM/DD/YYYY) of the report. EMIS must have a four digit year.	
4	TIME OF REPORT	The effective time (HH:MM - Colon must be used between HH & MM) of the report. This is in military time using the 24 hour clock but when it is entered into EMIS there must be a colon between hours and minutes.	
5	POINT OF CONTACT	Name of person knowledgeable about the report in the reporting jurisdiction.	
6	PHONE NUMBER	Phone number of the Point of Contact.	
7	FAX NUMBER	Fax number of the Point of Contact.	

ITEM #	Individual Assistance Damage	a. Destroyed	b. Major Damage ATC20 Red	c. Minor Damage ATC20 Amber	d. Affected ATC20 Green	e. Estimated Loss in \$K
8	Homes:					
9	Mobiles:					
10	Business:					
11	Other:					

12	Total:					
12	Total:					

NOTE: One apartment equals one home/dwelling. A 20 unit apartment building equals 20 homes.

13	Total Number of Structures/dwellings to be Inspected:	
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ITEM #	Public Assistance Category Damage (Do not include normal operating costs)	Number of Sites	Estimated Costs in \$K
14	18. CAT A: Debris Clearance:		
15	19. CAT B: Emergency Protective measures:		
16	20. CAT C: Road System Repairs:		
17	21. CAT D: Water Control Facilities:		
18	22. CAT E: Buildings & Equipment:		
19	23. CAT F: Public Utility Systems:		
20	24. CAT G: Other (Not in above Categories)		
21	25. Totals:		

ITEM #	DAMAGE & STATUS OF COUNTY/STATE ROADS	CONDITION	ESTIMATED COST TO REPAIR
22	Disaster Routes:		
23	Non Disaster Routes:		

ITEM #	Federal Program Damage	Estimated Costs in \$K
24	Federal Highways (Title 23 Program): (For damage to federal highway systems)	
25	U.S. Army Corps of Engineers (PL 99): (For emergency flood control projects)	

26	Soil Conservation Service: (For emergency watershed rehabilitation)	
27	Other (Describe):	
28	Total:	

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