

Rev 140904		CERT – DAMAGE ASSESSMENT FORM																						
Date:		Event				Person Recording / Team ID#: SAFE Team 2										Page of								
Incident	Observed	Reported	Priority	BURNING		GAS LEAK	WATER LEAK	ELECTRIC	CHEMICAL	LIGHT	MODERATE	HEAVY	IMMEDIATE **	DELAYED	TRAPPED	DEAD	ACCESS (limited)	NO ACCESS	OTHER	ASSIGNED	COMPLETED			
#	Time	By	Location	Fire	Hazard			Building	Damage			People			Road	/	X	Comments						
Prior page totals →																								
TOTALS for this page →				2	4	1	12	3	1	11	3	3	1	2	2	1	2	1	5					

Priority 1= Life Threatening or growing danger, **Priority 2** = Property/Small Fire incidents as you find them, **Priority 3** = for all other, i.e. delayed or minor. **NOTE: ** Immediate Medical = Life Threatening.** Use "?" for unknown quantities. Put a "1" in the OTHER column and use "Comments" when it doesn't fit in other column headings.

Net Control, SAFE Team 2, I have one Damage Assessment Form
 wait for go ahead

- Block 1, 2
- Block 2, 4
- Block 3, 1
- Block 4, 12

...

Block 15, 1

Block 16 5 – wait for acknowledgment or request for fills