

DAMAGE ASSESSMENT

CHARLESTON COUNTY CERT

DATE:		PERSON REPORTING:													PAGE #:		
TIME RECEIVED:		PERSON RECEIVING:															
		BURNING	OUT	GAS LEAK	H20 LEAK	ELECTRIC	CHEMICAL	DAMAGED*	COLLAPSED	INJURED	TRAPPED	DEAD	ACCESS	NO ACCESS	ASSIGNMENT COMPLETED		
TIME	ADDRESS/LOCATION		FIR	ES	HAZARDS				STRUC	TURES	PEOPLE		ROADS		/X		
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FOR USE BY EVERYONE

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 and time on the Post-incident Status form.