## **Disaster Assessment Reporting Form**

| ID# | Item                         | Remarks / Status |
|-----|------------------------------|------------------|
| 1   | Call Sign:                   |                  |
| 2   | Neighbourhood Reporting:     |                  |
| 3   | Status Report - Date / Time: |                  |
| 4   | Reported by (Name):          |                  |
| 5   | Fatalities:                  |                  |
| 6   | Serious Injuries:            |                  |
| 7   | Building Damage extent:      |                  |
| 8   | Road Status:                 |                  |
| 9   | Power Availability:          |                  |
| 10  | Phone/Cell Service:          |                  |
| 11  | Internet Service:            |                  |
| 12  | Most urgent issue:           |                  |