



DAMAGE ASSESSMENT

TOWN OF DAVIE FIRE RESCUE

COMMUNITY EMERGENCY RESPONSE TEAM



DATE: / /	PERSON REPORTING:	PAGE #:
TIME RECEIVED:	PERSON RECEIVING:	OF

TIME / DATE SEARCH TEAM DOING SEARCH	TIME / DATE EXITED	PERSONAL HAZARDS	NUMBER OF LIVE / DEAD	BURNING		GAS LEAK	H2O LEAK	ELECTRIC	CHEMICAL	DAMAGED*	COLLAPSED	INJURED	TRAPPED	DEAD	ACCESS	NO ACCESS	ASSIGNMENT COMPLETED	
				IN	OUT	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES	NO	YES

Summary of all hazards in area - fill out this form on your way to the 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.