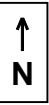


# Quick Hazard Survey

<b>DATE:</b>	<b>PERSON REPORTING:</b>	<b>PAGE #:</b>
<b>TIME RECEIVED:</b>	<b>PERSON RECEIVING:</b>	___ of ___

**MAP SKETCH:**



			POWER LINES	FILE	TREES	GAS	WATER	ROAD/STREET	ANIMALS	LIGHT POLE	DOWNDED FENCE	ODORS	OTHER HAZARDS		ASSIGNMENT COMPLETED
#	TIME	LOCATION/ADDRESS	HAZARDS										COMMENTS /DETAILS	/ X	

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.  
 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.

	<b>HAZARD TYPES</b>	
	<b>POWER LINES</b>	
	Arcing	
	Down	
	Dangling	
	<b>FIRE</b>	
	Smoke	
	Burning	
	<b>TREES</b>	
	Down/Uprooted	
	Blocking Road	
	On structure	
	On vehicle	
	<b>GAS</b>	
	Broken/Damaged Line	
	Leak	
	<b>WATER</b>	
	Main Break	
	Water Damage	
	Flooding	
	<b>Road/Street</b>	
	Accident	
	Cracks	
	Glass	
	Debris	
	Hazmat Spill	
	Congestion	
	<b>ANIMALS</b>	
	Stray	
	Vicious	
	<b>LIGHT POLE</b>	
	Unstable	
	Broken Glass	
	<b>DOWNED FENCE</b>	
	<b>ODORS</b>	
	Household Chemicals	
	Smoke	
	<b>OTHER HAZARDS</b>	