|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Initial damage assessment form | | | | | | | | | |
| **Assessment area** *[descriptive title]* | | |  | | | | | | |
| *[Insert or sketch map here]* | | | | | | | | | |
| Assessor’s details | | | | | | | | | |
| Name |  | | | | | | | | |
| Phone number |  | | | | Date *[yyyy/mm/dd]* | | |  | |
| Organisation/ agency |  | | | | | | | | |
| Address or location of survey area | | | | | | | | | |
| Street number |  | Street name | |  | | | | | |
| City |  | | | | | Post code | | |  |
| Coordinates (if applicable) | | | X |  | | | Y | |  |
| Common place name (if applicable) | | |  | | | | | | |
| Description of survey area | | | | | | | | | |
|  | | | | | | | | | |

|  |  |  |
| --- | --- | --- |
| Status of people, animals, and assets in area assessed | Tick as applicable | |
|  | People | Animals |
| Well, no assistance required |  |  |
| Well, but some assistance required |  |  |
| Injured |  |  |
| Deceased |  |  |
| Displaced |  |  |
|  | Tick as applicable | |
| Immediate deployment of welfare services and/or information is needed in this location | |  |
| More detailed welfare needs assessment is needed in this location | |  |
| Status of assets (infrastructure and buildings) in survey area | Tick as applicable | |
| Unknown | |  |
| Fully operational/open | |  |
| Operational (but at capacity) | |  |
| Operational (partially damaged or incapacitated) | |  |
| Destroyed or totally incapacitated | |  |
| Other notes | | |
|  | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Administration only** | | | | |
| Injured | Yes / No | Date/time confirmed | |  |
| Deceased | Yes / No | Assigned to |  | |
| Displaced | Yes / No |  |  | |