

INITIAL SITUATION OVERVIEW FORM

Assessment area *[descriptive title]*

[Insert or sketch map here, and use the reference indicators (e.g. A1, D2, M2) on the map to indicate the physical locations and status of assets.]

Assessor's details

Name			
Phone number		Date <i>[yyyy/mm/dd]</i>	
Organisation/ agency			

People and animals

	Status	Reference	Number	Notes
People	Injured	A1		
	Uninjured	A2		
	Deceased	A3		
	Displaced	A4		
Livestock	Injured	B1		
	Stranded	B2		
	Deceased	B3		
	Displaced	B4		
Companion animals	Injured	C1		
	Stranded	C2		
	Deceased	C3		
	Displaced	C4		

Assets				
	Damage	Reference	Number	Notes
Residential buildings or properties	Minor	D1		
	Major	D2		
Community buildings or properties (e.g. schools)	Minor	E1		
	Major	E2		
Commercial buildings or properties (e.g. shops, offices)	Minor	F1		
	Major	F2		
Power	Minor	G1		
	Major	G2		
Fuel	Minor	H1		
	Major	H2		
Water	Minor	I1		
	Major	I2		
Telecomms	Minor	J1		
	Major	J2		
Rail	Minor	K1		
	Major	K2		
Bridge	Minor	L1		
	Major	L2		
Hazardous materials (sewage, waste, chemicals etc.)	Minor	M1		
	Major	M2		
Roads	Minor	N1		
	Major	N2		

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