

Situation Report – Part 1: Summary

Jurisdiction/ Agency:		City, Province:	
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Date of Report:		Time of Report:		Report Number:	
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Primary Contact Information

Final Report:

Name:		Function/Title:	
Phone:		Satellite/Other Phone:	
Email:		Frequency/Call Sign:	

Site-Support Facility

EOC/ECC Activated:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Activation Level:	Level 1 <input type="checkbox"/> Level 2 <input type="checkbox"/> Level 3 <input type="checkbox"/>	Hours of Operation:	
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General Incident/Event Information

Event Name:		Task No.:	
Overall Status:	<input type="checkbox"/> Major Assistance Required <input type="checkbox"/> Assistance Required <input type="checkbox"/> Under Control <input type="checkbox"/> Resolved <input type="checkbox"/> Unknown <input type="checkbox"/> Closed	Incident Prognosis:	<input type="checkbox"/> Worsening <input type="checkbox"/> Stable <input type="checkbox"/> Improving <input type="checkbox"/> Unknown
		Overall Severity:	<input type="checkbox"/> Major <input type="checkbox"/> Moderate <input type="checkbox"/> Minor <input type="checkbox"/> Unknown

Initial Situation Summary *(What has happened and/or changed since the last Situation Report? **Bold** new information.)*

Current Objectives/ Priorities:	
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Future Objectives/ Priorities:	
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Concerns/ Problems:	
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Prepared by:	Name	Function/Title	Date & Time
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Approved by:	Planning Chief	EOC Director	Date & Time
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Distribution: Planning EOC Director Other: _____

Situation Report – Part 2: Details (Local Authority)

Jurisdiction/ Agency: City, Province:

Date of Report: Time of Report: Report Number:

Site-Support Activities

Declaration Issued: Yes No Effective Date: Anticipated Cancellation Date:

Protective Measures in EFFECT:

Shelter-in-Place:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Coverage Area(s):	<input style="width: 95%; height: 30px;" type="text"/>	# Persons Impacted:	<input style="width: 90%; height: 30px;" type="text"/>
Evacuation ALERTs:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Coverage Area(s):	<input style="width: 95%; height: 30px;" type="text"/>	# Persons Alerted:	<input style="width: 90%; height: 30px;" type="text"/>
Evacuation ORDERS:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Coverage Area(s):	<input style="width: 95%; height: 30px;" type="text"/>	# Persons Evacuated:	<input style="width: 90%; height: 30px;" type="text"/>

Reception Centre(s)/Group Lodging Facilities ACTIVATED: Yes No

#	Facility Name	Address	Capacity	Total Registered	Comments <small>(Hours of Operations)</small>
1	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>
2	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>
3	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>

Disaster Response Routes ACTIVATED: Yes No

Details/Routes Activated:

Major Impacts

People Impacts: None

	Under Alert	Evacuated	Homeless	Injured	Fatalities	Missing
Confirmed	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>
Unconfirmed <small>(In addition to confirmed)</small>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>

Details/Comments:

Livestock/Animal Impacts: None

Animal Type	Under Alert	Evacuated	Homeless	Injured	Fatalities	Disposed
<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>
<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>

Details/Comments:

Transportation Impacts: None

Area(s)/Location(s) of Impact	Nature of Impact <small>(closure, shutdown, blockage, reduced service...)</small>	Details/Comments: <small>(length of closure, anticipated opening...)</small>
Roads/Highways	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>
Bridges/Tunnels	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>
Railways	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>
Waterways	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>
Public Transit	<input style="width: 95%; height: 25px;" type="text"/>	<input style="width: 95%; height: 25px;" type="text"/>

Utility Impacts:

	Water	Sewer	Electricity	Gas	Telephone	Cellular
<input type="checkbox"/> None # Without Service						
% of Community Without Service						
Details/Comments:						

Structure Impacts:

	% Minor Damage	% Moderate Damage (Limited Use)	% Severe Damage (Unusable)	Details/Comments:
<input type="checkbox"/> None				
Residential				
Commercial				
Industrial				
Institutional				

Rapid Damage Assessment CONDUCTED:

Yes Not Planned To be Implemented

# of Buildings Inspected/Tagged	Red (Unsafe)	Yellow (Restricted Use)	Green (Inspected)	Details/Comments:

Resource Information

Surplus/ Available	Resource Type/Name	Location	Details/Comments
Resources:			
<input type="checkbox"/> None			

Critical Resources DESIGNATED:

Yes No

Name of Critical Resource(s)/Details:

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Public Information and Media Issues

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Other Comments

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Attachments:

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Distribution:

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