

Facility Name _____	SAP ID #s. _____
Address _____	Other Reports _____
Co-City-Vic _____	No. Photos _____ No. Sketches _____
Mo/Day/Yr _____/_____/_____ Time _____ use 24 hr.	Ref. Dwgs. _____
Type of Disaster _____	Est. Damage % _____
	Facility Status <input type="text"/>

SAFETY INSTRUCTIONS: The possibility of toxic gases in confined spaces or of fuel leaks should be recognized as a potential hazard.

CAUTION: The primary purpose of the report is to advise of the condition of the facility for immediate continued use/occupancy. REINSPECTION OF THE FACILITY IS RECOMMENDED. AFTERSHOCKS MAY CAUSE DAMAGE THAT REQUIRES REINSPECTION. The conclusions reached by engineers who re-examine the facility later should take precedence. The assessment team will not render further advice in the event of conflict of engineering recommendations.

A. CONDITION:

Existing: None Recommended: Green Posted at this assessment: Yes
Green Yellow No
Yellow Red
Red

B. RECOMMENDATIONS

Monitor _____ <input type="radio"/>	Continue in service _____ <input type="radio"/>
Remove from service _____ <input type="radio"/>	Install temp. above-ground line _____ <input type="radio"/>
Provide temporary alternate service _____ <input type="radio"/>	Check water quality/safety _____ <input type="radio"/>
Unblock entrance _____ <input type="radio"/>	Divert flow _____ <input type="radio"/>
_____ <input type="radio"/>	_____ <input type="radio"/>
_____ <input type="radio"/>	_____ <input type="radio"/>
_____ <input type="radio"/>	_____ <input type="radio"/>

C. COMMENTS _____

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D. PIPELINE DESCRIPTION

Assessment Report # _____

1. Type of pipeline: Pressure Gravity Storm Drain
 Water San. Sewer Other _____

2. Pipe nominal diameter: _____ 3. Proximity to water/sewer/gas line: _____

	AC	CI	CMP	DI	PVC	RC	STEEL	VC	WI	Other	Unknown
Bell & Spigot											
Butt											
Caulked											
Comp. Ring											
Riveted											
Welded											
Unknown											

4. Describe the failure mode:

- Circumferential crack Pulled joint
 Burst pipe barrel Broken joint
 Sheared pipe barrel Other _____
 Sheared service connection Liquefaction Describe _____

DAMAGE OBSERVED (D.O.)

	0	1	2-3-4	5	6	NA	NA
Damage Scale:	None	Slight	Moderate	Severe	Total	Not	Not
	(0%)	(1-10%)	(11 - 40%)	(41 - 60%)	(over 60%)	Applicable	Observed

SURFACE OBSERVATIONS

- | | |
|------------------------------------|-------------------------------------|
| D.O. | D.O. |
| E. _____ Ground surface disturbed | K. _____ Soffit damaged |
| F. _____ Visible leakage | L. _____ Invert displacement |
| G. _____ Service connection broken | M. _____ Horizontal displacement |
| H. _____ Headwall damaged | N. _____ Trash-rack blocked/damaged |
| I. _____ Endwall damaged | O. _____ Leakage at valves |
| J. _____ Manhole damaged | P. _____ Leakage continuing |
| | Q. _____ Leakage rates _____ |

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R. Nearest valve/MH (if less than 1/4 mile) _____

S. Remarks
