



# Elk Grove – Galt Community Emergency Response Team

## Form 1002    Damage Assessment - Neighborhood

Person Reporting: \_\_\_\_\_ Date: \_\_\_\_\_ Page: \_\_\_\_ of \_\_\_\_

Person Receiving: \_\_\_\_\_ Time Received: \_\_\_\_\_

		Burning	Fire Out	Gas Leak	Water leak	Electric	Chemical	Damaged *	Collapsed	Injured	Trapped	Deceased	Access	No Access	Assignment Complete
TIME	LOCATION/ADDRESS	FIRES (Y/N)		HAZARDS			STRUCTURE (H/M/L)		PEOPLE			ROADS		/X	
Notes															
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