

<b>DAMAGE ASSESSMENT FORM</b>	CERT _____	DATE _____
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LOCATION \_\_\_\_\_

**SIZE UP**  
(check if applicable)

FIRES		HAZARDS				STRUCTURE		PEOPLE			ROADS		ANIMALS		
BURNING	OUT	GAS LEAK	H2O LEAK	ELECTRIC	CHEMICAL	DAMAGED	COLLAPSED	INJURED	TRAPPED	DEAD	ACCESS	NO ACCESS	INJURED	TRAPPED	ROAMING

**OBSERVATIONS**

CERT MEMBER _____	PAGE ____ OF ____
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