### ATC-20 Rapid Evaluation Safety Assessment Form

#### Inspection

Inspector ID: ____________________________  Inspection date and time: ____________  AM  PM
Affiliation: ______________________________  Areas inspected:  Exterior only  Exterior and interior

#### Building Description

Building name: __________________________
Address: ________________________________

Building contact/phone: __________________
Number of stories above ground: _____, below ground: _____
Approx. "Footprint area" (square feet): __________
Number of residential units: _____________
Number of residential units not habitable: ________

#### Type of Construction

- [ ] Wood frame
- [ ] Steel frame
- [ ] Tilt-up concrete
- [ ] Concrete frame
- [ ] Concrete shear wall
- [ ] Unreinforced masonry
- [ ] Reinforced masonry
- [ ] Other: ________________

#### Primary Occupancy

- [ ] Dwelling
- [ ] Other residential
- [ ] Public assembly
- [ ] Emergency services
- [ ] Commercial
- [ ] Offices
- [ ] Industrial
- [ ] School
- [ ] Local government
- [ ] Other: ________________

#### Evaluation

Investigate the building for the conditions below and check the appropriate column.

<table>
<thead>
<tr>
<th>Observed Conditions</th>
<th>Minor/None</th>
<th>Moderate</th>
<th>Severe</th>
<th>Estimated Building Damage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Collapse, partial collapse, or building off foundation</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ] None</td>
</tr>
<tr>
<td>Building or story leaning</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ] 0 – 1%</td>
</tr>
<tr>
<td>Racking damage to walls, other structural damage</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ] 1 – 10%</td>
</tr>
<tr>
<td>Chimney, parapet, or other falling hazard</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ] 10 – 30%</td>
</tr>
<tr>
<td>Ground slope movement or cracking</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ] 30 – 60%</td>
</tr>
<tr>
<td>Other (specify)</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ] 60 – 100%</td>
</tr>
</tbody>
</table>

Comments: ____________________________________________________________

#### Estimated Building Damage (excluding contents)

- [ ] None
- [ ] 0 – 1%
- [ ] 1 – 10%
- [ ] 10 – 30%
- [ ] 30 – 60%
- [ ] 60 – 100%
- [ ] 100%

#### Posting

Choose a posting based on the evaluation and team judgment. Severe conditions endangering the overall building are grounds for an Unsafe posting. Localized Severe and overall Moderate conditions may allow a Restricted Use posting. Post INSPECTED placard at main entrance. Post RESTRICTED USE and UNSAFE placards at all entrances.

- [ ] INSPECTED (Green placard)
- [ ] RESTRICTED USE (Yellow placard)
- [ ] UNSAFE (Red placard)

Record any use and entry restrictions exactly as written on placard: ____________________________________________________________

### Further Actions

Check the boxes below only if further actions are needed.

- [ ] Barricades needed in the following areas: ______________________________________
- [ ] Detailed Evaluation recommended:  Structural  Geotechnical  Other: ______________
- [ ] Other recommendations: ______________________________________________________

Comments: ____________________________________________________________