

# Lifeline Assessment Form Heading

Facility Name: \_\_\_\_\_

Address: \_\_\_\_\_

County/City \_\_\_\_\_

Mo/Day/Yr \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Time \_\_\_\_\_

use 24 hr

Type of Disaster \_\_\_\_\_

SAP ID Nos. \_\_\_\_\_

Other Reports \_\_\_\_\_

No. Photos \_\_\_\_\_ No. Sketches \_\_\_\_\_

Ref. Dwgs. \_\_\_\_\_

Est. Damage % \_\_\_\_\_

Facility Status

**SAFETY INSTRUCTIONS:** The possibility of the presence of toxic gases in confined spaces or of fuel leaks should be recognized as a potential hazard. ALSO: The FAA is responsible for checking and evaluating damage to control tower equipment, lighting controls, communication systems, navigational aids, and approach light systems. Obtain permission from tower to enter runway. Permission obtained from \_\_\_\_\_

**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 <input type="radio"/>	Recommended:	Green <input type="radio"/>	Posted at this assessment:	Yes <input type="radio"/>
	Green <input type="radio"/>		Yellow <input type="radio"/>		No <input type="radio"/>
	Yellow <input type="radio"/>		Red <input type="radio"/>		
	Red <input type="radio"/>				