APPENDIX 6-A: CERT FORMS

Damage Assessment

Date:		Person Reporting:								Page #	# :					
Time Re	ceived:	Person Receiving:														
			Burning	Out	Gas Lead	H2O Lead	Electric	Chemical	Damage*	Collapsed	Injured	Trapped	Dead	Access	No Access	Assignment Completed
Time	Location/Addres	s	Fir	es		Haz	ards		Struc	tures	F	People	е	Roa	ads	/X

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Summary of all hazards in area - fill out this form on your way to Command Post and give it to Incident Command. (* for structure damage: h=heavy, m=moderate, l=light)

Incident Command: Choose an incident, put a slash in the assignment completed column, copy the address/location to the incident name section on Incident Briefing, and give Incident Briefing and Assignment Status to incident team leader. Copy address/location to Post-Incident Status and enter start time. When incident is complete, put a backslash in the assignment completed column and the incident end time on the Post-Incident Status form.

Personnel Resources

Date:	Person Reporting:						Page #:				
Print Name and Time		Skill Specialty Rank From 1-5 or Print "No"									
Name	Time In	Time Assigned	Fire	Medical	S&R	Transport	Document	Other			

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Have people sign in and mark their special skills. When you assign someone to a team, circle that team's box next to their name and enter the time assigned. When someone returns from an assignment, draw a line through their name and all boxes and have the person sign in again. Remember to check how long people have been assigned and who hasn't been assigned yet.

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Equipment Resources

Date:		Person Reporting:							Page	#:	
			Fire Extinguisher	Wrench	Flashlight	First Aid Kit	Blankets				
Time:	Loaned T	o :									
											<u> </u>

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Enter equipment and supplies as they come in and out. Total periodically.

If an item is returned empty (for instance, a fire extinguisher), add it back in and circle the number, so you don't include it in your next total.

Incident Briefing Prepared By: Date: Time: **Incident Name:** Map Sketch: **Current Organization: Incident Commander: Battalion: Summary of Current Actions** Be aware of hazards! Work as a team!

FOR INCIDENT COMMANDER

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Incident Command: Transfer an incident from Damage Assessment sheet. Sketch a map of the incident area, if known, with any hazards. Enter Incident Commander's name and Battalion number under current organization. Give to incident team leader with Assignment Status sheet.

Incident team leader: Sketch a map of the incident area with any hazards, if not done by Incident Command. Summarize the actions of your teams. When incident is complete, return this form, along with Assignment

Status, to Incident Command.

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Message Form							
То:	Message Center Use Only						
From:	Time:						
Time:	Date: ☐ Incoming ☐ Outgoing						
Message Text:							
Action Taken:							

USE CLEAR CONCISE TEXT

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Examples: assignment completed, additional resources needed, unable to complete, special information/status update.

Incident Status

Date:	Person Reporting:		Page:
Address/Location	Assignment	Start Time	End Time

FOR INCIDENT COMMAND

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Record incident assignments from Damage Assessment sheets. When incident is complete, enter end time and make a backslash for that incident on the Damage Assessment.

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Victim Treatment Area Record

Date:	Person Reporting:				Page #:
Time In:	Name or Description	Triage Tag	Condition	Moved To:	Time Out

Document each person brought to the treatment area. If victim cannot give name, write a brief description, e.g., sex, approximate age, hair color, race, etc.

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FOR MEDICAL TREATMENT AREA

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Tag color: red=Immediate, yellow=Delayed, green=Minor, black=DEAD.