COES 204 Preliminary Safety Assessment Roll-up Form – EOC

	Call Sign:										
	Date/Time:										
	Message ID:										
	Msg Type:										
	Map Coord:										
	Units Surveyed:										
Ref	**Category**										
1.1	Injuries, Minor										
1.2	Injuries, Delayed										
1.3	Injuries, Immediate										
1.4	Injuries, Presumed Dead										
2.1	Structure, Light Damage										
2.2	Structure, Moderate Damage										
2.3	Structure, Heavy Damage										
3.1	Fire, Any situation										
3.2	Gas Leaks										
3.3	Sewer Leaks										
3.4	Water Main Breaks										
3.5	Electrical Power,										
4.1	Roads blocked										