

Rapid Damage Assessment Form

Date:		Time:		Pictures Taken?	Yes		No	
Water Installation		Wastewater Installation			Treatment Facility			
Facility Name:								
Address:								
Person Making Report:								
Phone:			Email:					
1. Power Supply		Line Power Condition:		*On			Off	
*If line power is on, go to question #2								
Is there visible damage to overhead lines?					Yes		No	
Are line fuses open?					Yes		No	
Are trees or limbs on electrical lines?					Yes		No	
Is the service line to the electrical cabinet damaged?					Yes		No	
2. Flooding								
Is the facility accessible?					Yes		No	
Is the facility under water?					Yes		No	
Is there evidence of inundation (high water marks)?					Yes		No	
3. Electrical Status								
Is there a generator onsite?					Yes		No	
Is the generator operational?					Yes		No	
Is the generator on?					Yes		No	
Is the electrical panel damaged?					Yes		No	
Is SCADA equipment operable?					Yes		No	
Are there any breakers tripped inside the panel?					Yes		No	
Number of pumps onsite:								
How many of the pumps are operational?								
4. Other Damage								
Are piping systems functional?					Yes		No	
Is there evidence of spills or other reportable activity?					Yes		No	
5. Comments:								