

JOURNAL CONTENTS

Exhibit A: Site Posting Photos
Exhibit B: Clean Up & Storage Photos

- Exhibit E: Storage Detail

A. SITE INSPECTION

To be filled out by the Field Coordinator prior to any Full Encampment Clean Up and as part of any Obstruction or Hazard Removal. Site Journals and photos should be saved in the appropriate folder in the <G:\FAC\Encampments\Encampment clean ups> directory.

| | | | |
|---|----------------------------------|----------------------------|---|
| CSR Listing: | 1259 29TH AVE, SEATTLE, WA 98122 | Date of Inspection: | 2-14-20 |
| Site Address: | 1259 29 th Ave | Date of Clean-Up: | 2-14-20 |
| CSR Number: | 20-00015733 | | |
| Field Coordinator (Initial Inspector): | J Lohman | Photos to FAS? | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Referred By: | Community, CSR | | |
| Responding Field Coordinator: | J Lohman | | |

Field Coordinators are responsible for ensuring that photos are taken to document the clean-up event and saved to the appropriate G: Drive folder. This includes pictures of site conditions, tents, storage, and before/after photos.

SITE OCCUPANCY DATA

| Date of Event | Tents | Structures | Bed Rolls | Vehicles | TOTAL COUNT |
|---------------|-------|------------|-----------|----------|-------------|
| 2-14-20 | 0 | 1 | 0 | 0 | 1 |
| | | | | | |

SITE CHARACTERISTICS

| | | |
|--|---|--|
| Park | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Sidewalk | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Within 50ft of a water body or wetland | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Roadway | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Within 50ft of a Guardrail | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Heavy Traffic | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Near Industrial Zone | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Forested Area | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Play Area | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Rented Area | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Slope | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Slide Zone | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Fire | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Other: | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Other: | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Other: | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

HEALTH CONDITIONS

| | | |
|-----------------------|---|--|
| Disorganized | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Garbage/Bagged | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Garbage/Loose | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Garbage/Bulky Items | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Garbage/Metal | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Human Waste | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Rats/Mice | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Hazardous Materials | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Falling Tree or Limbs | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Chemical Waste | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Fires | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Criminal Activity | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Weapons | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Open Alcohol | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Sharps | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Property Damage | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

| | |
|---------------------|---|
| TOTAL COUNT: | 1 |
|---------------------|---|

| | |
|---------------------|---|
| TOTAL COUNT: | 5 |
|---------------------|---|

Obstruction or Hazard Clean-up: Notice of Immediate Removal

Obstruction Clean-up: 24 or more -hours of notice **Number of Hours' Notice Was Given** _____

Field Coordinators should take site photos. All collected photos including those from the Navigation Officers and store all photos in the appropriate G: Drive folder:

EXHIBIT A: SITE INSPECTION AND POSTING PHOTOS

During a site inspection, Field Coordinators should take photos of the following and store the photos in the appropriate G: Drive folder:

- Documentation of the Actual Obstruction or Hazard
- Vehicles/RVs /License Plates
- Living in Vehicle

OUTREACH REPORT

Outreach is not required for an obstruction or Hazard encampment removal. If provided attach documentation.

EXHIBIT C: CLEAN-UP PHOTOS

NAVIGATION TEAM ASSESSMENT

| | | |
|---|---|---|
| <input checked="" type="checkbox"/> Obstruction Removal | <input type="checkbox"/> Emphasis Zone | <input type="checkbox"/> Hazard Removal |
| <input checked="" type="checkbox"/> Blocking intended use of facility | | <input type="checkbox"/> Safety of camper |
| <input checked="" type="checkbox"/> Tent on side walk | | <input type="checkbox"/> Safety of others near and around camp |
| <input type="checkbox"/> Tent on median adjacent to sidewalk | | <input type="checkbox"/> Safety of camper and others near and around camp |

B. PRE-CLEAN UP ACTIVITIES

CHECKLIST for OBSTRUCTION CLEAN UP

Notice posting in advance of cleanup (Date:)

Cleanup is occurring on date specified in notice

Personnel are ready to identify and collect belongings

SPD or WSP officers are present to support cleanup

Crew is present and ready to support cleanup

NOT REQUIRED but PROVIDED:

Outreach was provided before or day of the cleanup

Emphasis Zone

(Date:) _____

(Date:) _____

2-14-20

Yes No

C. RESOURCE PLANNING

SITE CREW ASSESSMENT of FIELD CONDITIONS
JOB SITE INSTRUCTIONS

- | | | |
|---------------------------------|---|--|
| Fall Protection Required | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Waste Hauling to Dump | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Waste Hauling to Other Location | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Vegetation Pruning | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Biohazard Waste | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

Specifications/Notes

| | | |
|---|---|----------------|
| Number of Internal City Labor Crew Involved | 4 | Parks w/packer |
| Number of External Crew Involved | 2 | Cascadia |
| Number of Hazmat Crew Involved | 1 | |
| Number of Truck Drivers Approved | 1 | |
| Number of Full Time Days On-site Approved | 0 | |
| Number of Partial Days On-site Approved | 1 | |
| Total Hours Approved | 1 | |

SITE OCCUPANCY DATA (Include photos of Site that depicts the number of Tents, Bedrolls and Structures)

| Day of Clean-up | Tents | Structures | Bed Rolls | Vehicles | TOTAL COUNT |
|-----------------|-------|------------|-----------|----------|-------------|
| 2-14-20 | 0 | 1 | 0 | 0 | 1 |

STORAGE SUMMARY

Total should equal total in Occupancy Data

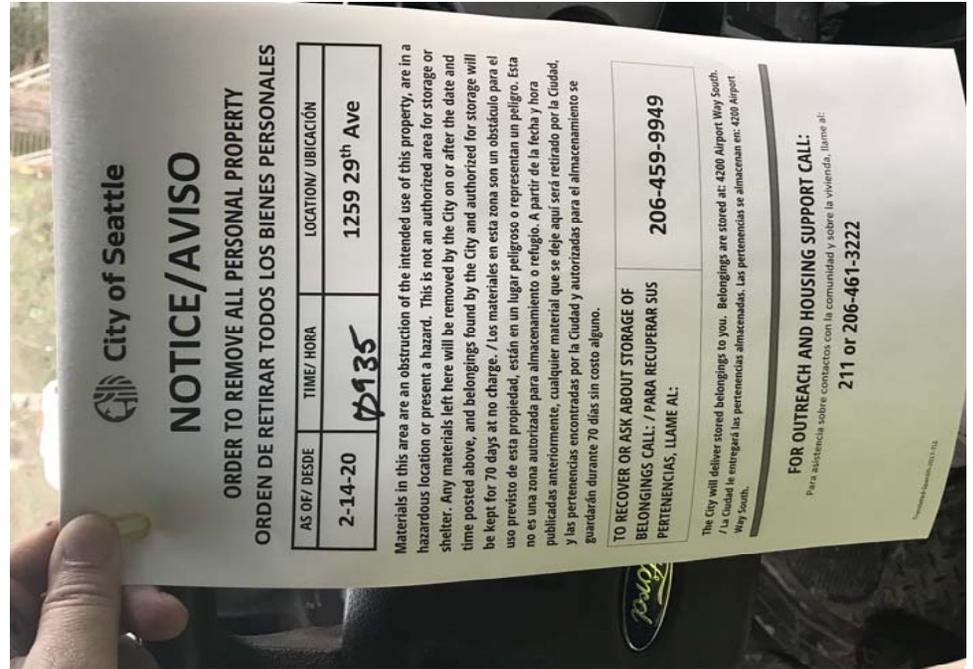
| TOTAL TENTS/STRUCTURES/BEDROLL/VEHICLES | | | | |
|---|---|--|---|---|
| OWNER PRESENT Accepted Storage | 0 | | ABANDONED TENT or Structure Content Storable | 0 |
| OWNER PRESENT Removed Tent | 1 | | ABANDONED TENT or Structure Content Not Storable | 0 |
| OWNER PRESENT Removed tent but stored contents | 0 | | ABANDONED BEDROLL Storable | 0 |
| ABANDONED TENT Not Storable | 0 | | ABANDONED BEDROLL Not Storable | 0 |
| Impounded Vehicle(s) | 0 | | Vehicle(s) -Left Premises | 0 |

Storage Totals

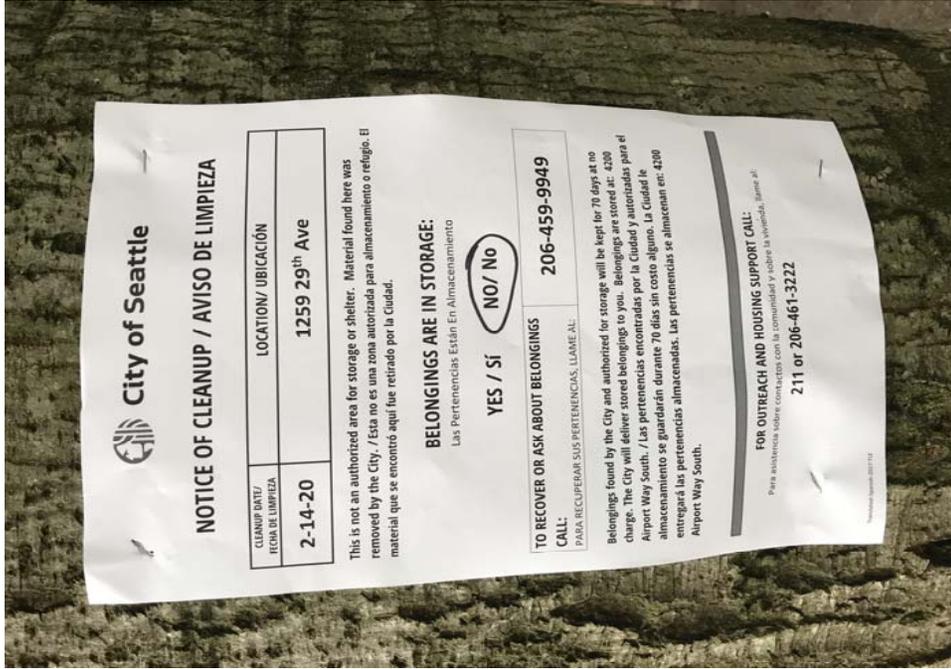
| Number of Bins | Bikes | Large Luggage Items | Large Items |
|----------------|-------|---------------------|-------------|
| 0 | 0 | 0 | 0 |

EXHIBIT E: Storage Documentation

Exh D - Clean Up Photos



After Clean Photos





Site Name: 1259 29th Ave

 Date of Clean Up: 2-14-20

 Field Coordinators are responsible for completing this form as part of the *Site Journal*. You should log the following –

- Tent owners who present and accept storage
- Tent owners who are present and indicate that they want their tent/belongings disposed of
- Abandoned tents or items found in debris that we are storing
- Abandoned tents that we are disposing of

Each tent/structure should occupy one line so we can document if storage was offered, accepted or to explain why we disposed or stored items. After this form is complete, you will use the totals from this form to fill out the Storage Summary and Totals information.

Tent Naming Convention: T#-Initials-MonthDay

Example: T1-JH-0428

| Owner Name or Tent/Structure # | Owner Present? | Storage? | Not Storable? <i>Check All That Apply</i> | # of Bins | # of Bikes | # of Luggage | # of Large Items | Short Description |
|--|---|--|---|-----------|------------|--------------|------------------|-------------------|
| Nothing storable – campers took property | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input type="checkbox"/> N/A | <input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged | | | | | |
| | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input type="checkbox"/> N/A | <input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged | | | | | |
| | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input type="checkbox"/> N/A | <input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged | | | | | |
| | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input type="checkbox"/> N/A | <input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged | | | | | |
| | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input type="checkbox"/> N/A | <input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged | | | | | |