



5/14/2020	2	0	0	0	2
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PRIORITY CONDITION DATA

VULNERABLE POPULATIONS

- Perceived Elderly (60+ years old) Yes No
- Perceived Infants/Children (≤ 14 years old) Yes No
- Perceived Youth (15-24 years old) Yes No
- Perceived Not Ambulatory Yes No
- Perceived Wounds Yes No
- Near Facilities for Children (e.g., school, daycare) Yes No
- Near Facilities for the Elderly (e.g., nursing home) Yes No
- Perceived Women Yes No
- Perceived Couples Yes No
- LGBTQIA (DATA ONLY COLLECTED IF ASKED-- otherwise leave blank) Yes No
- POC (DATA ONLY COLLECTED IF ASKED-- otherwise leave blank) Yes No
- Presence of Alcohol Yes No
- Presence of Contained Sharps Yes No

TOTAL COUNT:

PUBLIC HEALTH/BIOWASTE

- Rats/Mice Yes No
- Hazardous Materials Yes No
- Bio Waste Yes No
- Chemical Waste Yes No
- Food Waste Yes No
- Within 50ft of a water body or wetland Yes No
- Loose Sharps Yes No

TOTAL COUNT:

SOLID WASTE

- Disorganized Garbage Yes No
- Bagged Garbage Yes No
- Loose Garbage Yes No
- Bulky Items Garbage Yes No
- Metal Yes No

TOTAL COUNT:

PUBLIC SAFETY/STRUCTURAL CONCERNS

- Weapons Yes No
- Park Yes No
- Sidewalk Yes No
- Proximity to Bridge Yes No
- Impeding Roadway Yes No
- Within 50ft of a Guardrail Yes No
- Heavy Traffic Yes No

STRUCTURAL CONCERNS/ENVIRONMENTAL RISKS/EMERGENCY RISKS

- Near Industrial Zone-blocking vehicle site Yes No lines
- Falling Trees/Limbs Yes No
- Forested Area Yes No
- Rented Area Yes No
- Property Damage Yes No

TOTAL COUNT:

- | | | |
|----------------------------|---|--|
| Slope more than 27 degrees | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Slide Zone | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Fires | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Exposed Electrical Wiring | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Other | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |

TOTAL COUNT:	
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TOTAL SCORE:	
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EXHIBIT A: SITE INSPECTION PHOTOS

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

- Cross Street Signs
- Photos of Individual Tents
- Vehicle/RVs/License Plates
- General Photos of the Encampment
- Debris Fields

NAVIGATION TEAM ASSESSMENT

- Full encampment cleanup
- Litter pick
- Reported to SPU as illegal dump
- Obstruction or hazard cleanup
- Clean - no campers

B. OBSTRUCTION/HAZARD

<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 type="checkbox"/> Tent on sidewalk		<input type="checkbox"/> Safety of others near and around camp
<input type="checkbox"/> Tent on median to adjacent sidewalk		<input type="checkbox"/> Safety of camper and others near and around camp

a. OBSTRUCTION/HAZARD PRE-CLEANUP ACTIVITIES

CHECKLIST for OBSTRUCTION CLEAN UP

- Notice posting is 72 hours in advance of cleanup (Date:) _____ Yes No
- Cleanup is occurring on date specified in notice Yes No
- Personnel are ready to identify and collect belongings Yes No
- SPD or WSP officers are present to support cleanup Yes No
- Crew is present and ready to support cleanup Yes No
- NOT REQUIRED but PROVIDED:**
- Outreach was provided before the cleanup (Date:) _____ Yes No

b. OBSTRUCTION/HAZARD RESOURCE PLANNING
SITE CREW ASSESSMENT of FIELD CONDITIONS
JOB SITE INSTRUCTIONS

- | | | |
|---------------------------------|---|--|
| Fall Protection Required | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Waste Hauling to Dump | <input type="checkbox"/> Yes | <input checked="" 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 checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Chemical Waste | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

Specifications/Notes

EXTERNAL CONTRACTORS

	Total	Description
Number of Labor Crew	2	CASCADIA
Number of Hazmat Crew	1	
Number of Truck Drivers	1	
Contractors Labor Crew Hours On-Site	2	

INTERNAL CLEAN UP TEAMS

	Total	Description
Number of Heavy Crew	_____	_____
Heavy Crew Hours On-site	_____	_____
Number of Labor Crew	_____	_____
Labor Crew Hours On-site	_____	_____

STAGING LOCATION

Date/Time: _____ Location: _____

SITE POSTING PHOTOS

 No Regular Encampment Clean-up: 72-hour Notice

- Cross Street Signs
- General Photos of the Encampment
- Close up to read post signage
- At a distance to view entire camp
- After Photos

Field Coordinators should take photos and collect photos from the Navigation Officers and store them photos in the appropriate G: Drive folder:

OUTREACH REPORT

The Outreach Coordinator will provide a consolidated report for both pre-engagement and day-of activities of the outreach and Navigation team.

Date	Type	Location	Male Outreach	Female Outreach	Non-specific Gender	TOTAL # of People Contacted
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OBSTRUCTION SITE OCCUPANCY DATA

Date of Inspection	Tents	Structures	Bed Rolls	Vehicles	TOTAL COUNT
5/14/2020	2	0	0	0	2

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

- Owners who are present and accept storage
- Abandoned property that we are storing
- Abandoned property that we are disposing of and why

Each tent/structure/bedroll/vehicle should occupy one line so we can document if storage was offered, accepted and/or to explain why items were disposed of.

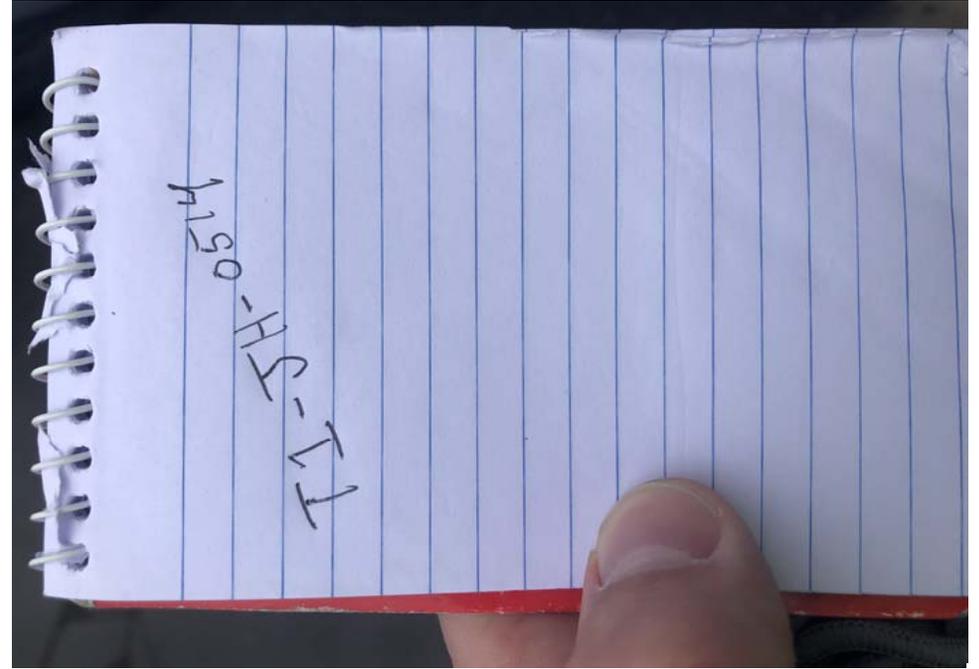


STORAGE TOTALS

Number of Bins	Bikes	Large Luggage Items	Large Items
2	0	0	0

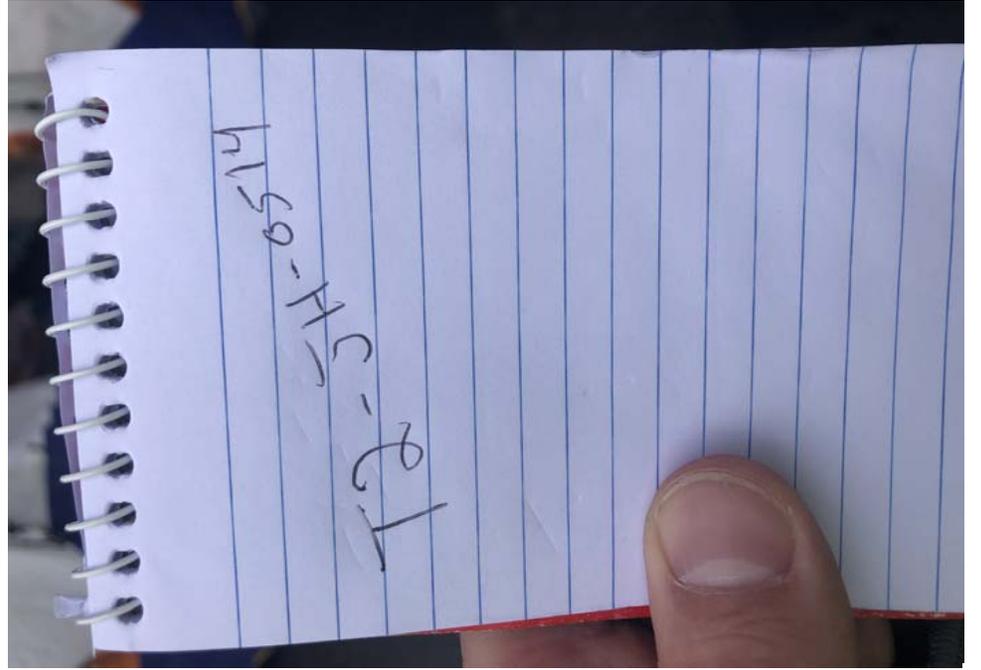
Owner Name OR Tent/Structure #	Owner Present?	Storage?	Not Storable? <i>Check All That Apply</i>	# of Bins	# of Bikes	# of Luggage	# of Large Items	Short Description
T1-JH-0514	No	N/A		0	0	0	0	TENT NOT STORED DUE TO BEING RIPPED. INSIDE WAS DIRTY AND WET CLOTHES, BROKEN SUITCASE. NOTHING STORED.
T2-JH-0514	No	N/A		2	0	0	0	BLUE AND WHITE TENT STORED, INSIDE WAS DIRTY AND WET BEDDING AND CLOTHES, WET COT. STORED CAMO BAG, 2 MINI LIGHTS, 2 BLACK BAGS, MISC WIRES AND A PAIR OF SUNGLASSES.

Exh D - Clean Up Photos













After Clean Photos



NOTICE OF CLEANUP / AVISO DE LIMPIEZA

CLEANUP DATE/ FECHA DE LIMPIEZA	LOCATION/ UBICACIÓN
05/14/20	Alaskan Way and S Main St

This is not an authorized area for storage or shelter. Material found here was removed by the City. / Esta no es una zona autorizada para almacenamiento o refugio. El material que se encontró aquí fue retirado por la Ciudad.

BELONGINGS ARE IN STORAGE:
Las Pertencias Están En Almacenamiento

YES / SI NO / NO

TO RECOVER OR ASK ABOUT BELONGINGS CALL:
PARA RECUPERAR SUS PERTENENCIAS, LLAME AL: **206-459-9949**

Belongings found by the City and authorized for storage will be kept for 70 days at no charge. The City will deliver stored belongings to you. Belongings are stored at: 4200 Airport Way South. / Las pertenencias encontradas por la Ciudad y autorizadas para el almacenamiento se guardarán durante 70 días sin costo alguno. La Ciudad le entregará las pertenencias almacenadas. Las pertenencias se almacenan en: 4200 Airport Way South.

FOR OUTREACH AND HOUSING SUPPORT CALL:
Para asistencia sobre contactos con la comunidad y sobre la vivienda, llame al: **211 or 206-461-3222**



INVENTORY OF PERSONAL PROPERTY REMOVED FROM ENCAMPMENT

Location of Encampment: Alaskan Way and S Main St Log Number: 1500

Date of Collection: 05/14/20 Name of Owner (If Party Self Stored): T2-JH-0514

Item(s) Description:	Bag Number	Photos Taken by Whom? (Please print and attach)	Date of Posting Notice of Removal Property	If Partial Inventory/ Remaining in Storage Date: Items Removed:
Blue + white tent	1	[Signature]	05/14/20	
3 mini light, black backpack		[Signature]		
Black bag, misc. phone cases		[Signature]		
3.3 sec sunglasses		[Signature]		
A-BIN				

Employee's Signature: Jeff Hen Date: 05/14/20

REQUEST FOR DELIVERY

Delivery Location	Delivery Date:
Item(s) Removed from storage by:	Date:
Recovered Item(s) Received By:	Date:

