

JOURNAL CONTENTS

Exhibit A: Site Posting Photos
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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:	1215 10TH AVE W, SEATTLE, WA 98119	Date of Inspection:	11-19-19
Site Address:	SW Queen Anne Greenbelt	Date of Clean-Up:	11-19-19
CSR Number:	19-00203436	Photos to FAS?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Field Coordinator (Initial Inspector):	J Lohman		
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
11-19-19	8	0	0	0	8
SITE CHARACTERISCS		HEALTH CONDITIONS			
Park	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Disorganized		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Sidewalk	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Garbage/Bagged		<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	Garbage/Loose		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Roadway	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Garbage/Bulky Items		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Within 50ft of a Guardrail	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Garbage/Metal		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Heavy Traffic	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Human Waste		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Near Industrial Zone	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Rats/Mice		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Forested Area	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Hazardous Materials		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Play Area	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Falling Tree or Limbs		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Rented Area	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Chemical Waste		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Slope	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fires		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Slide Zone	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Criminal Activity		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Fire	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Weapons		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Other:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Open Alcohol		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Other:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Sharps		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Other:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Property Damage		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
TOTAL COUNT:	3	TOTAL COUNT:		14	

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

Date	Type	Location	Male Outreach	Female Outreach	Non-specific Gender	Total Number of People Contacted
11/19/2019	Outreach	Queen Anne Greenbelt	6	2	0	8

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 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:)	11-14-19	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Cleanup is occurring on date specified in notice	_____	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Personnel are ready to identify and collect belongings		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
SPD or WSP officers are present to support cleanup		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Crew is present and ready to support cleanup		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
NOT REQUIRED but PROVIDED:		
Outreach was provided before or day of the cleanup	(Date:)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Emphasis Zone	(Date:)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

C. RESOURCE PLANNING

SITE CREW ASSESSMENT *of* FIELD CONDITIONS

JOB SITE INSTRUCTIONS

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

Specifications/Notes

Number of Internal City Labor Crew Involved	10/5	Parks W/packer / WSDOT Heavy Team
Number of External Crew Involved	8	Cascadia
Number of Hazmat Crew Involved	1	
Number of Truck Drivers Approved	2	
Number of Full Time Days On-site Approved	1	
Number of Partial Days On-site Approved	0	
Total Hours Approved	8	

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
11-19-19	8	0	0	0	8

STORAGE SUMMARY

Total should equal total in Occupancy Data

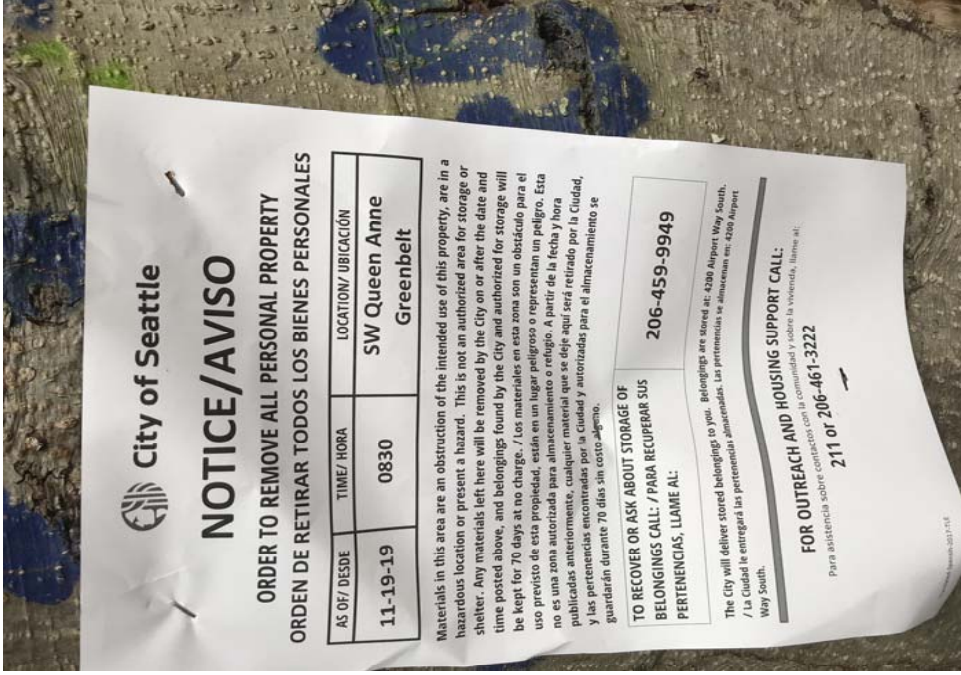
TOTAL TENTS/STRUCTURES/BEDROLL/VEHICLES				
OWNER PRESENT Accepted Storage	0		ABANDONED TENT or Structure Content Storable	0
OWNER PRESENT Removed Tent	0		ABANDONED TENT or Structure Content Not Storable	0
OWNER PRESENT Removed tent but stored contents	0		ABANDONED BEDROLL Storable	0
ABANDONED TENT Not Storable	3		ABANDONED BEDROLL Not Storable	0
OWNER PRESENT Asked FC to Dispose of Tent	5			

Storage Totals

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

▶ EXHIBIT E: Storage Documentation

Exh B - Posting Photos







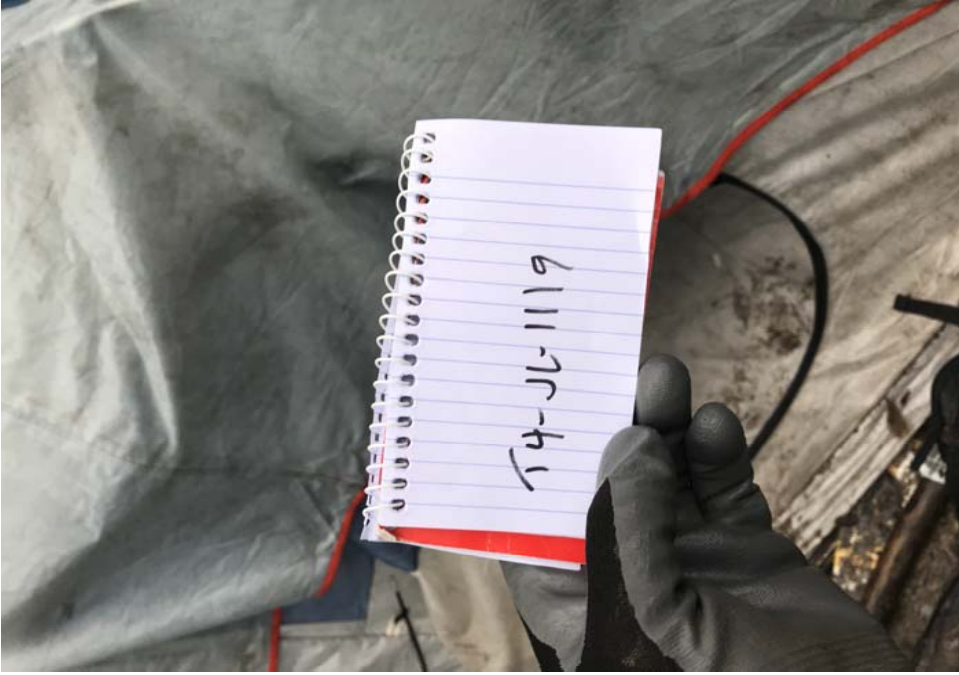


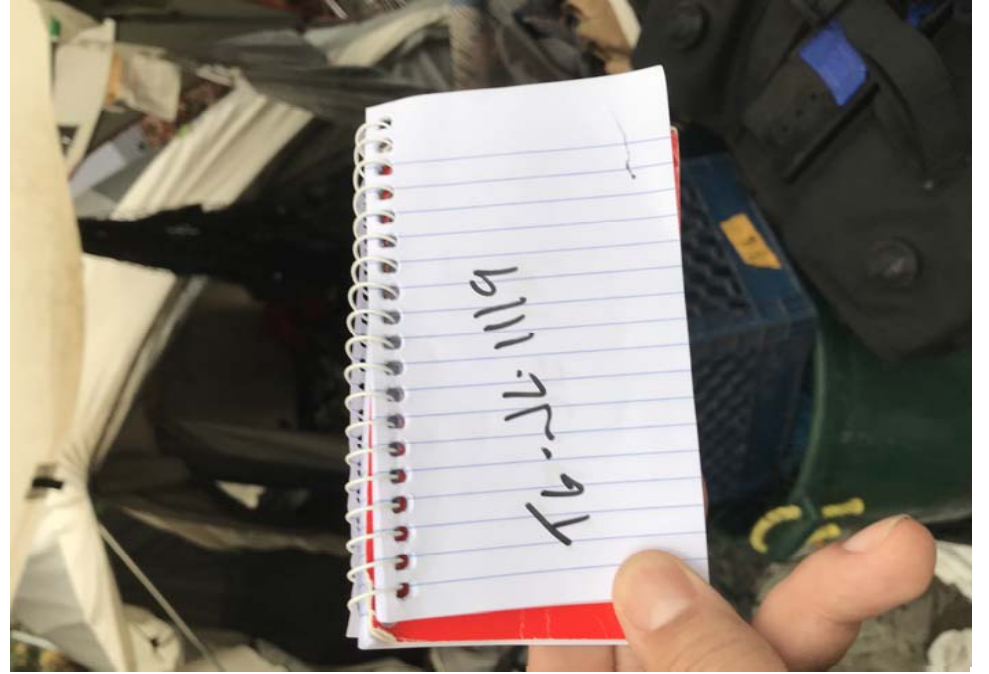
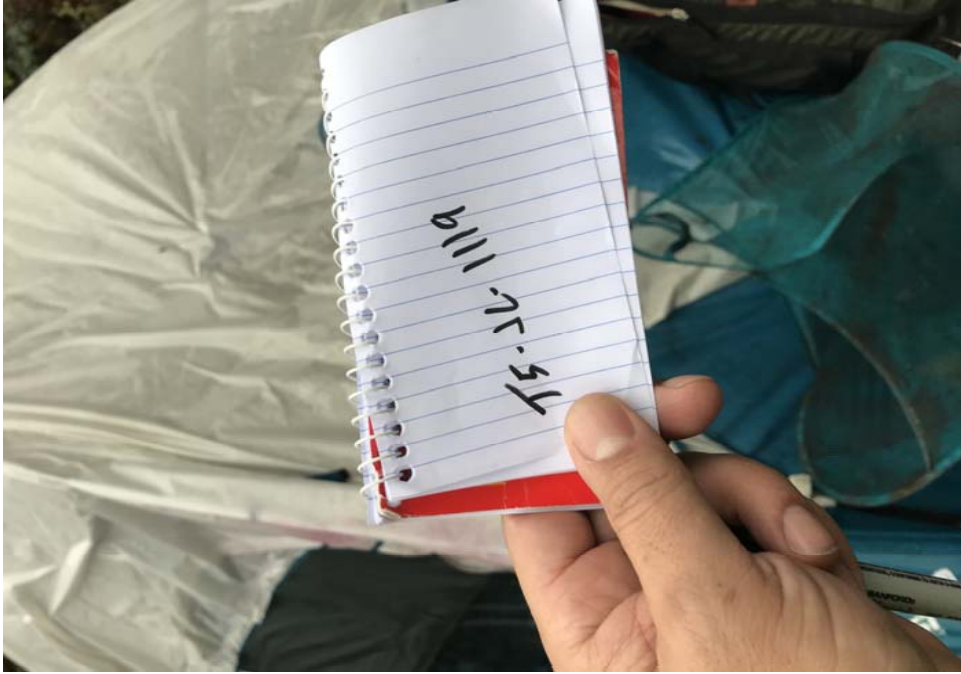


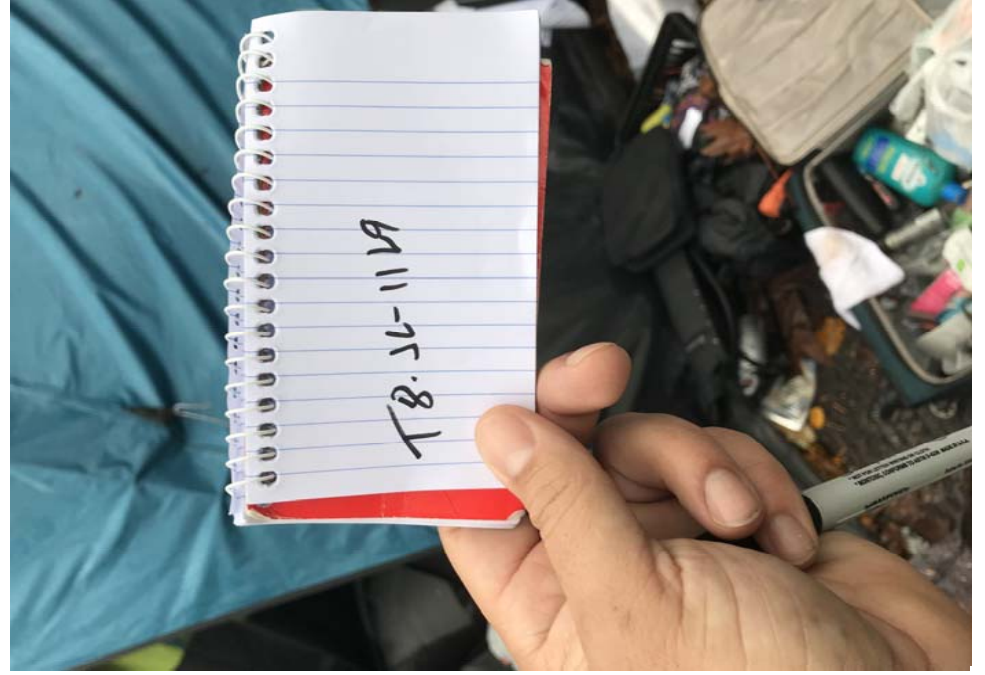
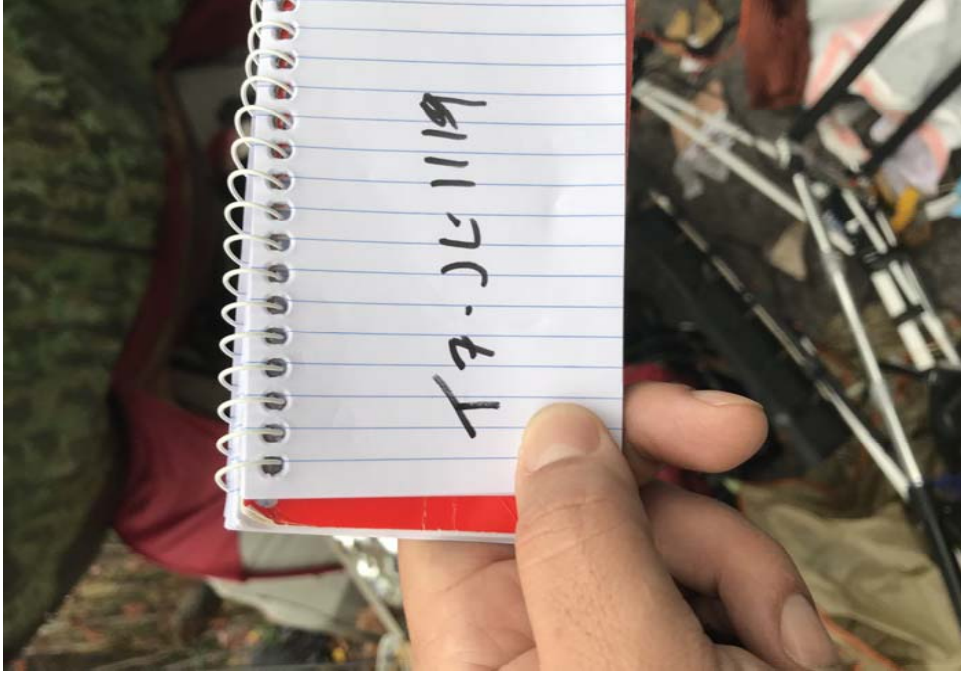


Exh D - Clean Up Photos

















After Clean Photos

NOTICE OF CLEANUP / AVISO DE LIMPIEZA

CLEANUP DATE / FECHA DE LIMPIEZA	LOCATION / UBICACIÓN
11/19/16	S.W Queen Anne Greenbelt

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 Pertencencias Están En Almacenamiento

YES / SÍ NO / NO

TO RECOVER OR ASK ABOUT BELONGINGS CALL:
PARA RECUPERAR SUS PERTENCENCIAS, 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**











11-19-19

 Site Name: SW Queen Anne GB

Date of Clean Up: _____

 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 <i>or</i> 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-JL-1119	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Accepted <input checked="" type="checkbox"/> Declined <input type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged	0	0	0	0	Owner, [REDACTED] 40's , asked FC to dispose of tent. All left behind was garbage.
T2-JL-1119	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input checked="" type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input checked="" type="checkbox"/> Damaged	0	0	0	0	Nothing storable- tent ripped, garbage, wet and moldy bedding and clothing and syringes inside of tent.
T3-JL-1119	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input checked="" type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input checked="" type="checkbox"/> Damaged	0	0	0	0	Nothing storable- tent ripped, wet and moldy bedding and clothing, garbage and syringes inside of tent.
T4-JL-1119	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input checked="" type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input checked="" type="checkbox"/> Damaged	0	0	0	0	Nothing storable- tent ripped, unknown liquid on floor of tent, tent was empty.
T5-JL-1119	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Accepted <input checked="" type="checkbox"/> Declined <input type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged	0	0	0	0	Owner, [REDACTED] 28, asked FC to dispose of tent. All left behind was garbage.

Owner Name <i>or</i> Tent/Structure #	Owner Present?	Storage?	Not Storable? <i>Check All That Apply</i>	# of Bins	# of Bikes	# of Luggage	# of Large Items	Short Description
T6-JL-1119	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Accepted <input checked="" type="checkbox"/> Declined <input type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged	0	0	0	0	Owner, [REDACTED] 28, asked FC to dispose of tent. All left behind was garbage
T7-JL-1119	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Accepted <input checked="" type="checkbox"/> Declined <input type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged	0	0	0	0	Owners, [REDACTED] 20's, asked FC to dispose of tent. All left behind was garbage.
T8-JL-1119	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Accepted <input checked="" type="checkbox"/> Declined <input type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged	0	0	0	0	Owners, [REDACTED] 20's, asked FC to dispose of tent. All left behind was garbage.
	<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 Beyond Repair					