



4/30/2020	6	1	0	0	7
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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

<b>TOTAL COUNT:</b>	0
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**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

<b>TOTAL COUNT:</b>	1
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**SOLID WASTE**

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

<b>TOTAL COUNT:</b>	4
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**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

<b>TOTAL COUNT:</b>	0
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- |                            |                              |  |
|----------------------------|------------------------------|--|
| 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 type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

<b>TOTAL COUNT:</b>	2
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<b>TOTAL SCORE:</b>	18
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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 checked="" 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 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 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 |
| Chemical Waste                  | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |

**Specifications/Notes**


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**EXTERNAL CONTRACTORS**

	<b>Total</b>	<b>Description</b>
Number of Labor Crew	2	Cascadia
Number of Hazmat Crew	1	Cascadia
Number of Truck Drivers	1	Cascadia W/Trailer
Contractors Labor Crew Hours On-Site	2	

**INTERNAL CLEAN UP TEAMS**

	<b>Total</b>	<b>Description</b>
Number of Heavy Crew	0	
Heavy Crew Hours On-site	0	
Number of Labor Crew	4	Parks W/Packer
Labor Crew Hours On-site	2	

**STAGING LOCATION**

**Date/Time:** 5/4/2020 8:30 AM      **Location:** At Location

**SITE POSTING PHOTOS**

No      Regular Encampment Clean-up: 72-hour Notice

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- 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
5/4/2020	6	0	1	0	7

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
0	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
	Yes	Declined		0	0	0	0	Nothing Stored. All Tents removed by owners

# Exh D - Clean Up Photos





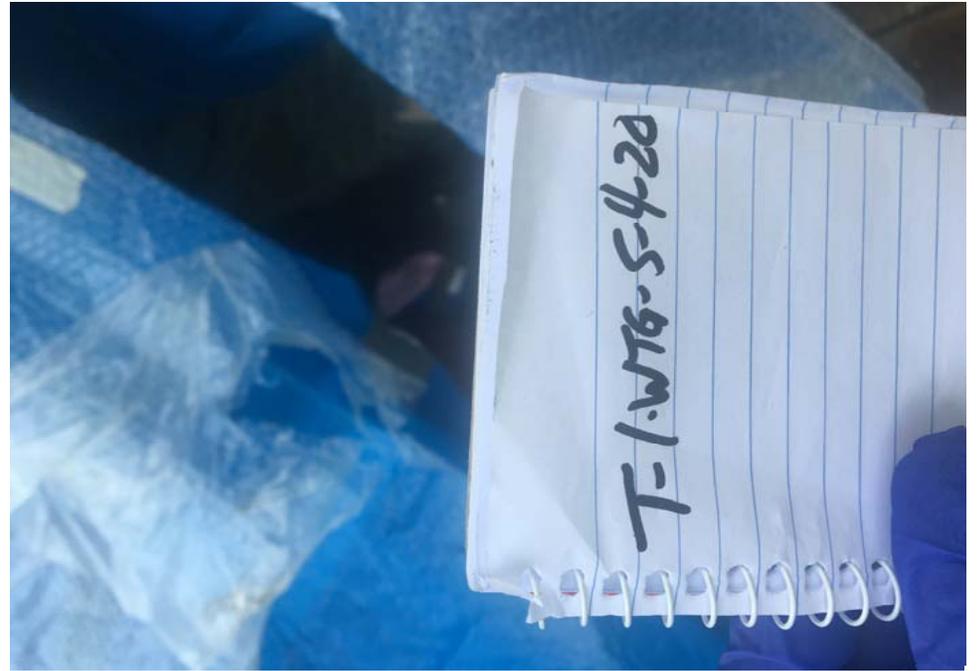






























# After Clean Photos









