

SITE JOURNAL CONTENTS

- Completed Site Journal
- Exhibit A: Site Inspection Photos
- Exhibit B: Site Posting Photos
- Exhibit C: Outreach Report
- Exhibit D: 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.

Site:	<u>Alaskan Way -Main St to Madison St</u>	Date of First Inspection:	<u>2/27/18</u>
Site Address:	<u>Alaskan Way -Main St to Madison St</u>	Date of Clean-Up:	<u>3/26-28/18</u>
Inspection By:	<u>Jeff Horan</u>	SERIS #	<u>679-04, 1086-03, 89-06, 898-08, 455-08, 1108-08, 899-07</u>
Referred By:	<u>SERIS</u>	Photos to FAS?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

SITE OCCUPANCY DATA

Date of Inspection	Tents	Structures	Bed Rolls	Vehicles	TOTAL COUNT
2/27/18	40	0	0	0	40

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 checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Heavy Traffic | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Near Industrial Zone | <input checked="" type="checkbox"/> Yes | <input 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 checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Rats/Mice | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Hazardous Materials | <input checked="" type="checkbox"/> Yes | <input 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 checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Weapons | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Open Alcohol | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Sharps | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Property Damage | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

TOTAL COUNT:	4
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TOTAL COUNT:	10
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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 | • Obstructions or Hazards |
| • General Photos of the Encampment | • Debris Fields | • Vehicles/RVs /License Plates |

NAVIGATION TEAM ASSESSMENT		
<input checked="" type="checkbox"/> Full Encampment Clean Up	<input type="checkbox"/> Obstruction Removal	<input type="checkbox"/> Hazard Removal
	<input type="checkbox"/> Tent on side walk	<input type="checkbox"/> Safety of Occupant
	<input type="checkbox"/> Blocking intended use of facility	<input type="checkbox"/> Safety of other near and around camp
		<input type="checkbox"/> Cleared by scheduled contractors- FAS
		<input type="checkbox"/> Remand to SPU
PRE-JOB SITE ASSESSMENT & INSTRUCTIONS		Specifications/Notes
Uneven Terrain (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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	_____
SPU ASSESSMENT & INSTRUCTIONS	Date	Requirements:
<input type="checkbox"/> Litter removed -area more than 20 feet from active camp		<input type="checkbox"/> Field Coordinator accessed
<input type="checkbox"/> Illegal Dumping -Encampment Related Trash		

B. 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 checked="" type="checkbox"/> Yes <input 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 |

Specifications/Notes

EXTERNAL CONTRACTORS

	Total	Description
Number of Labor Crew Involved	5	Cascadia 3/27/18
Number of Hazmat Crew Involved	1	
Number of Truck Drivers Approved	1	
Number of Full Time Days On-site Approved	1	
Number of Partial Days On-site Approved	0	
Total Hours Approved	8	

INTERNAL CLEAN UP TEAMS

	Total	Description
Number of Heavy Teams	0	
Number of Light Teams	1	Parks & Packer Support (3/27-28/18)
Number of Full Time Days On-site Approved	1	
Number of Partial Days On-site Approved	1	(3/28/18 if needed)
Total Hours Approved	12	

STAGING LOCATION

Date: 3/27-28/18 Time: 0900 Location: Alaskan Way & Yesler

C. PRE-CLEAN UP ACTIVITIES

Day of Clean-up	Tents	Structures	Bed Rolls	Vehicles	TOTAL COUNT
3/27/18	17	1	4	0	22

STORAGE SUMMARY

Total should equal total in Occupancy Data

TOTAL TENTS/STRUCTURES			
OWNER PRESENT Accepted Storage	1	ABANDONED TENT Content Storable	1
OWNER PRESENT Removed Tent (4 were bedrolls)	16	ABANDONED TENT Content Not Storable	0
OWNER PRESENT Removed tent but stored contents	0	ABANDONED TENT Storable	0
OWNER PRESENT Asked FC to Discard Tent	1	ABANDONED TENT Not Storable	3

STORAGE TOTALS

Number of Bins	Bikes	Large Luggage Items	Large Items
2	0	0	3

EXHIBIT E: STORAGE INFO

Field Coordinators are responsible for ensuring that we log information about each tent/structure that is at the clean-up site. This includes regular, obstruction and hazard clean-ups.

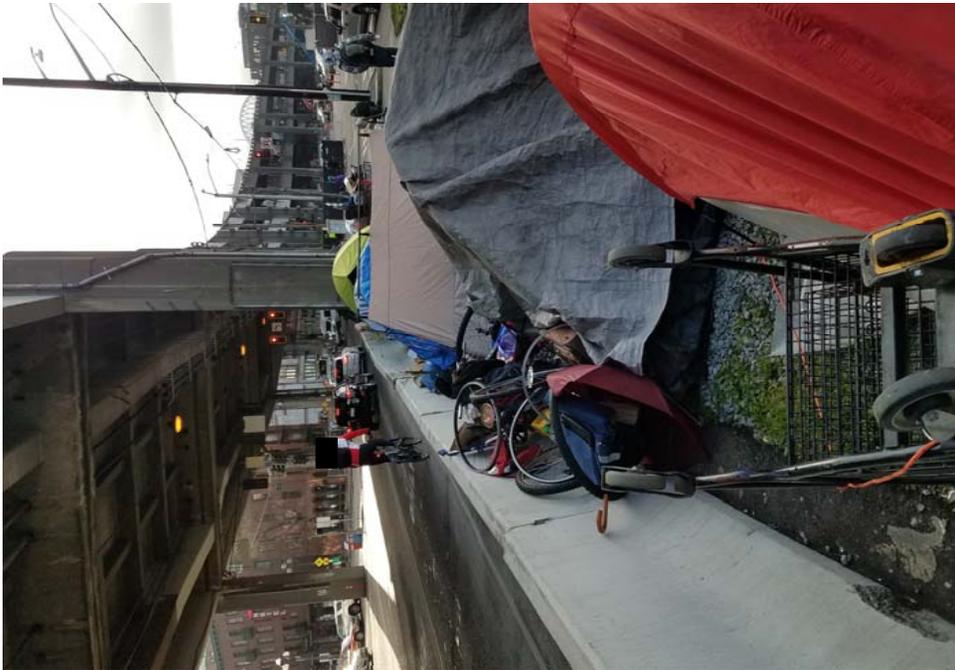
Exh A: Site Inspection Photos















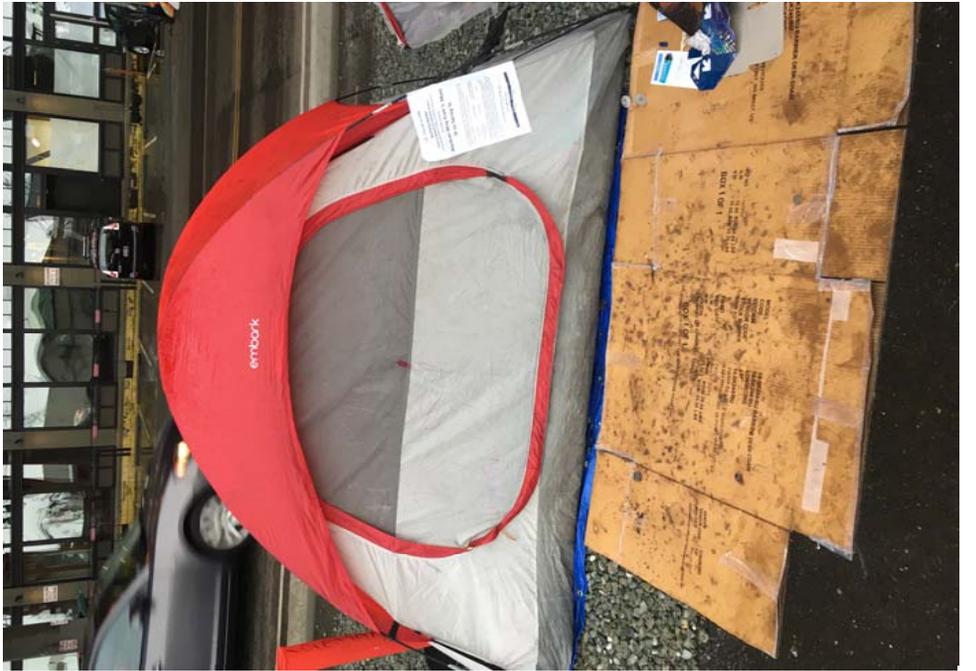




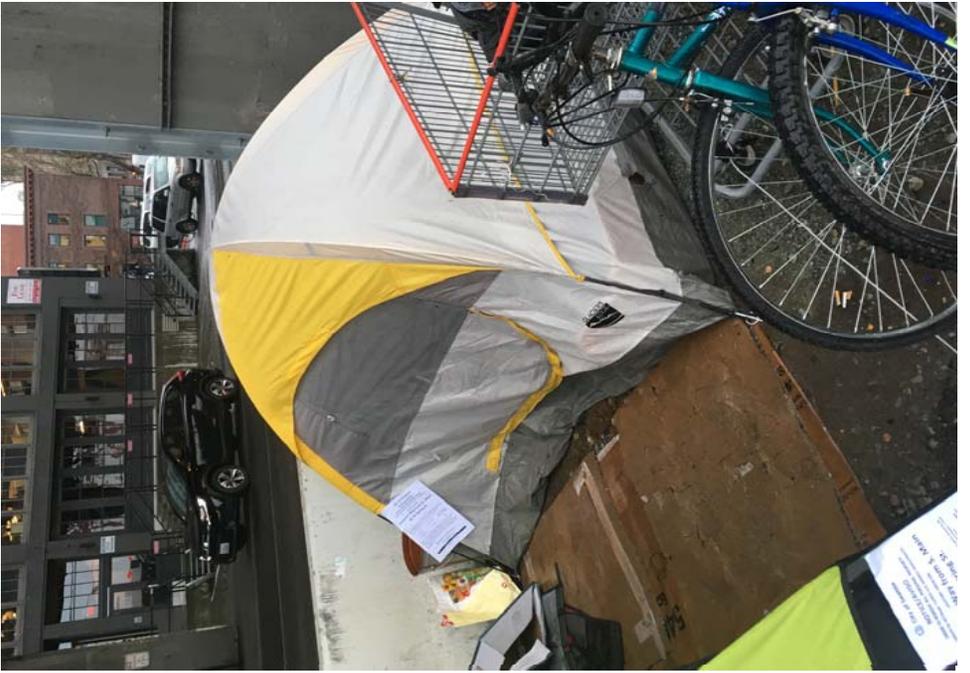


Exh B: Site Posting Photos

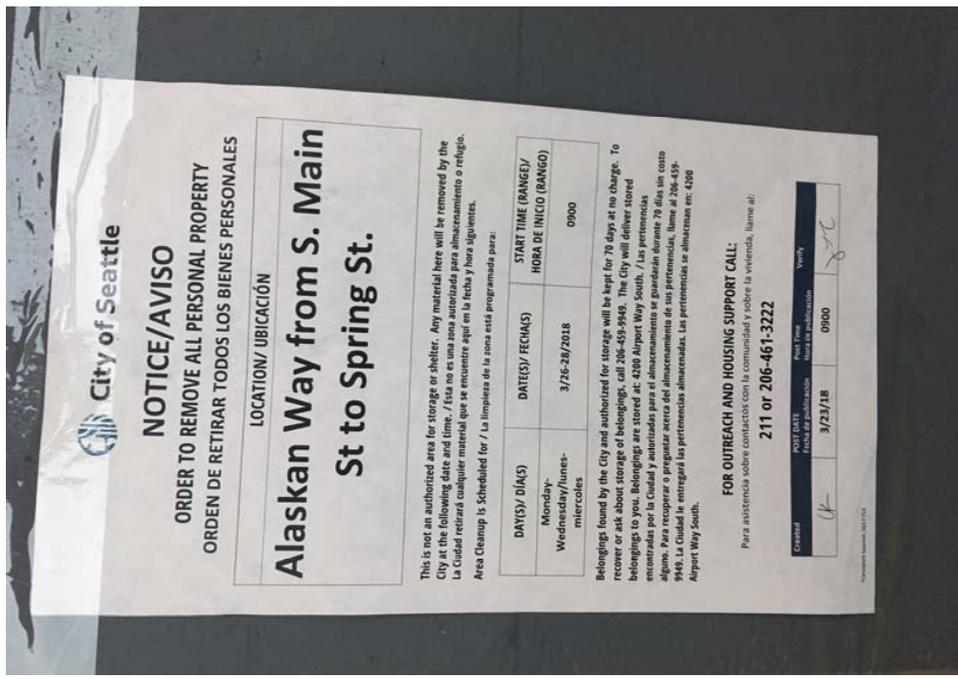




















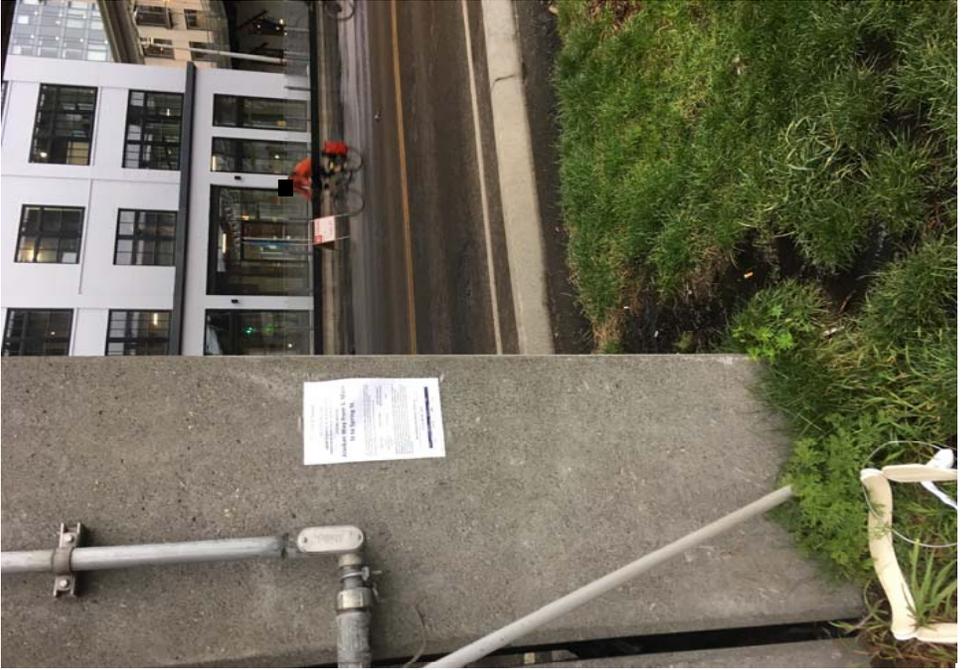












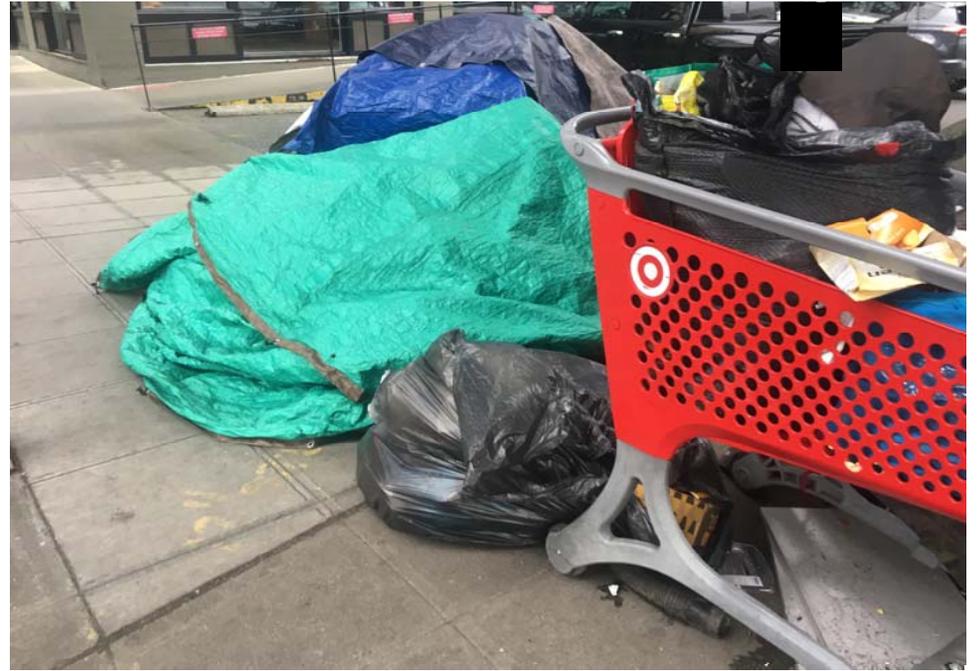




Exh D: Clean-Up & Storage Photos



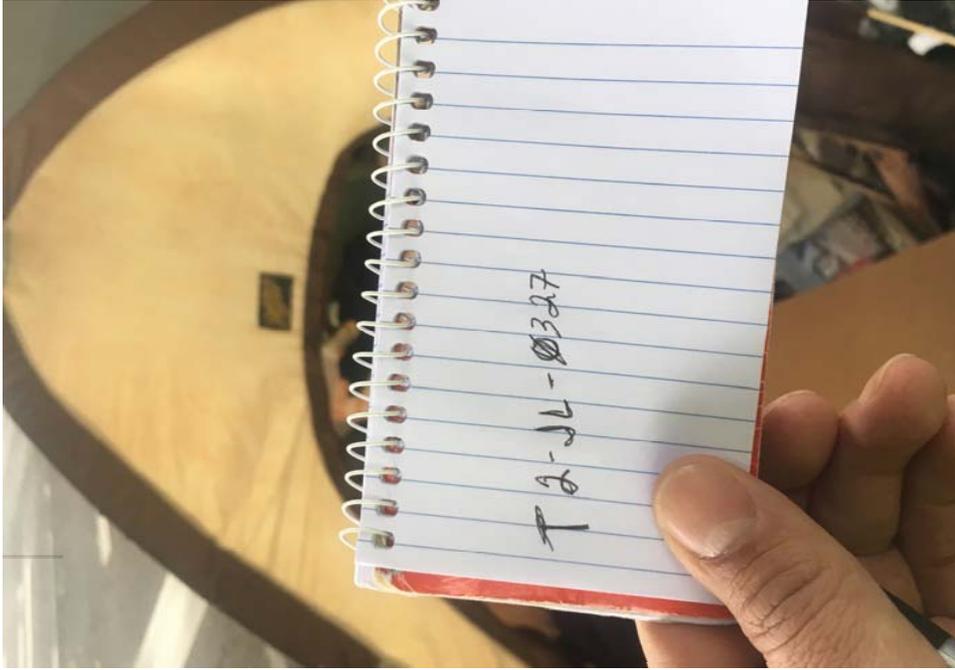


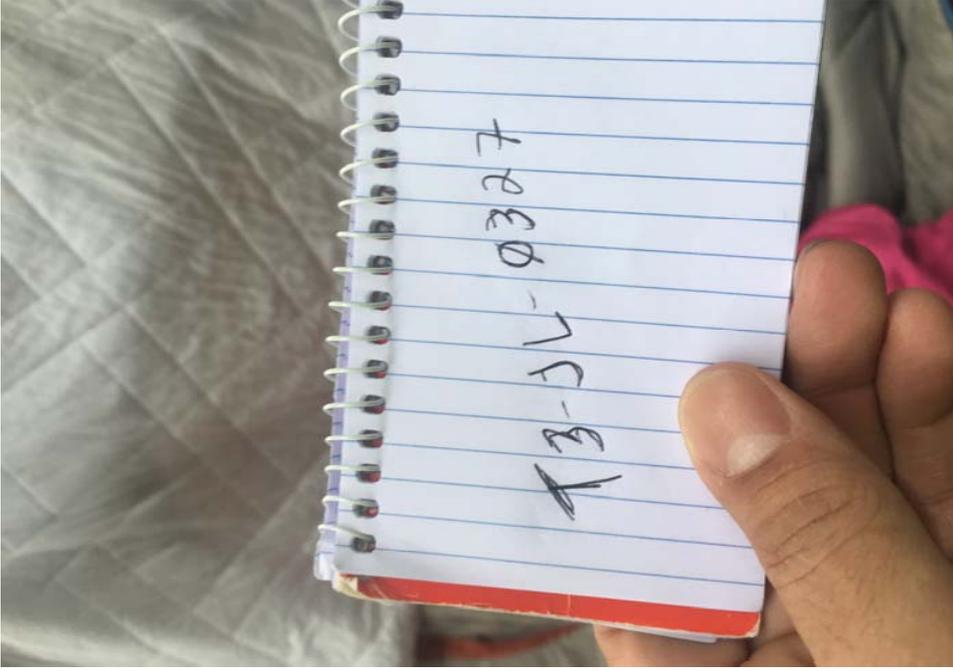


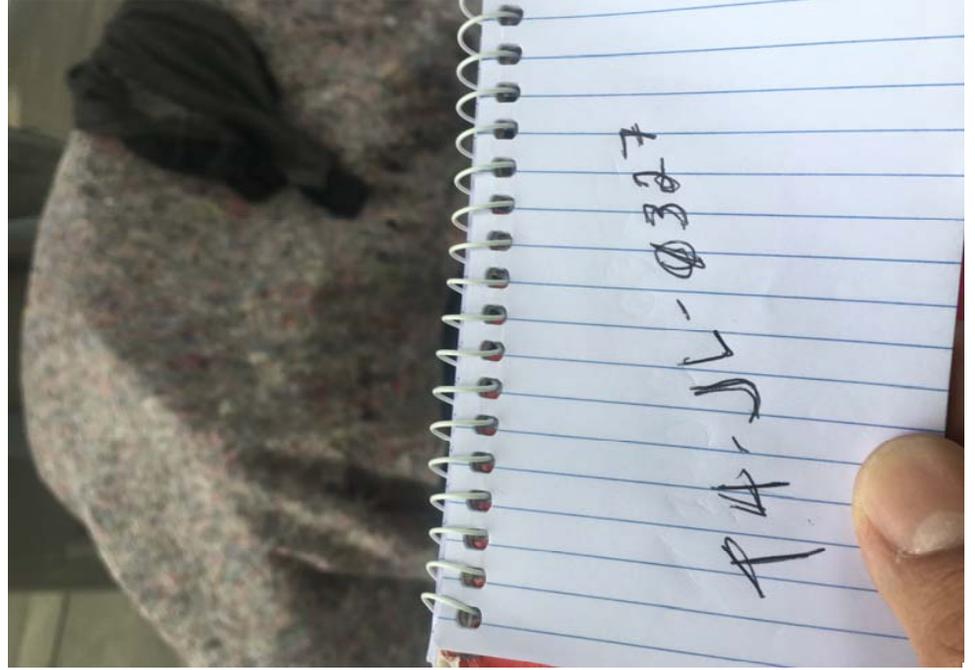








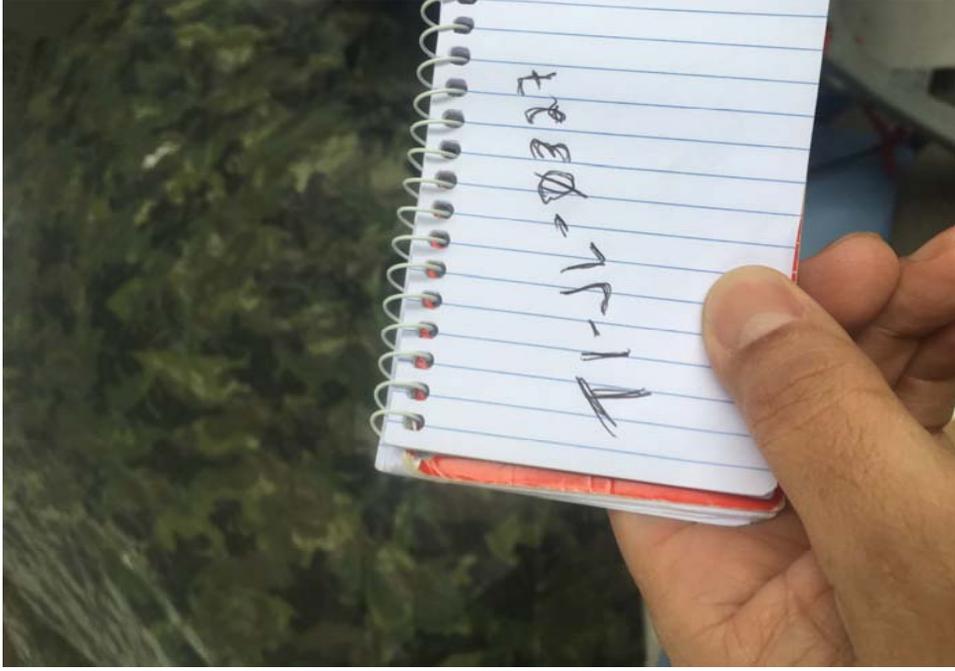




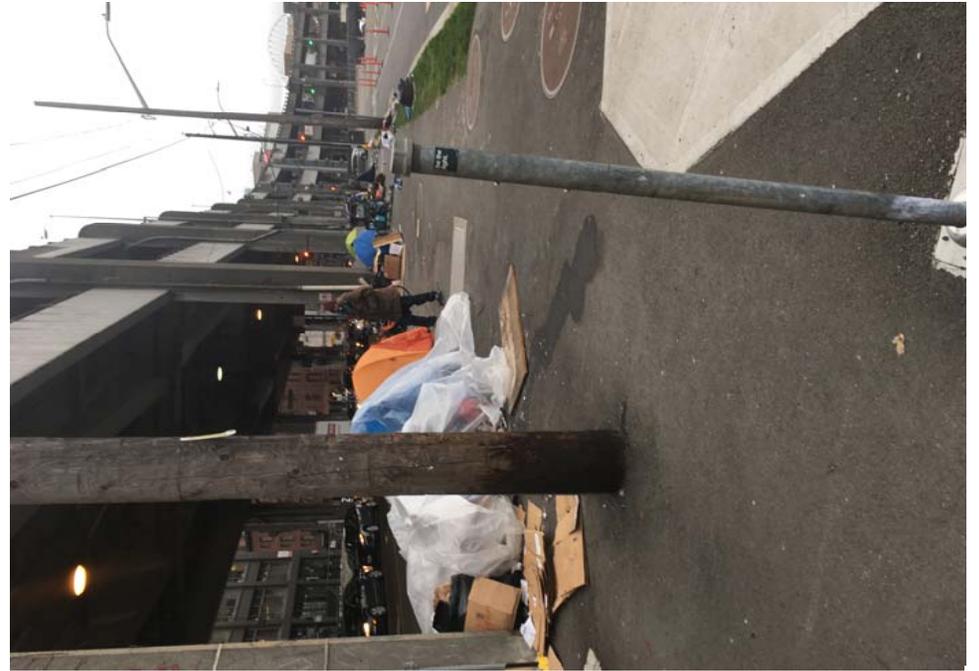








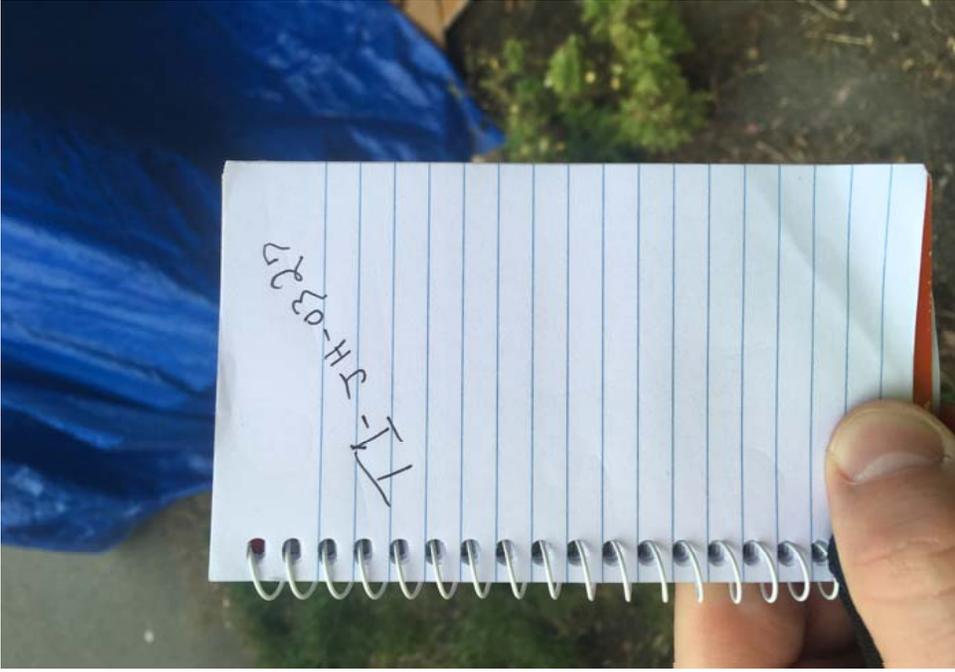


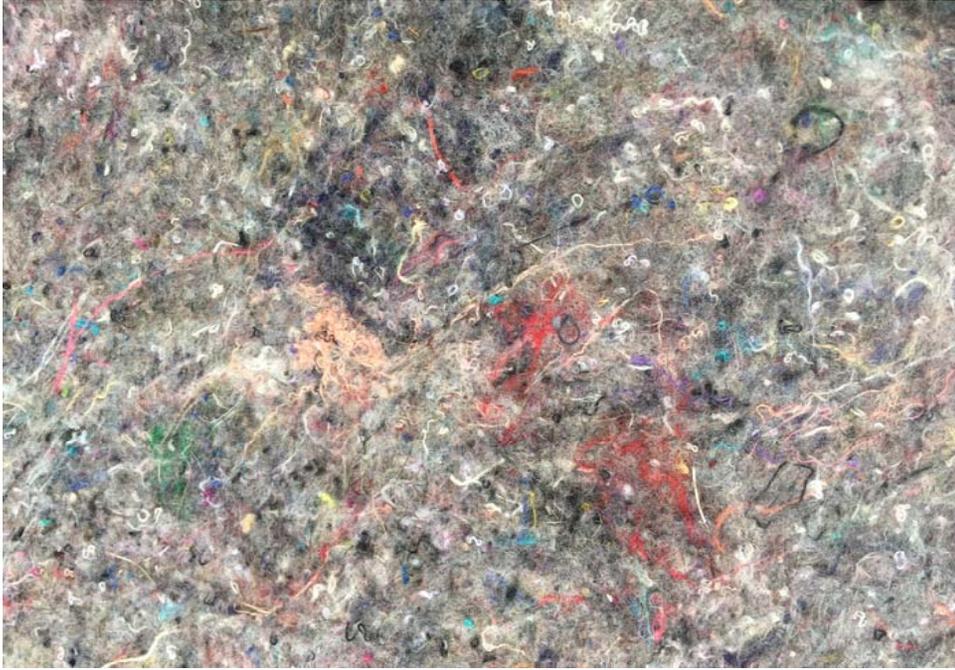




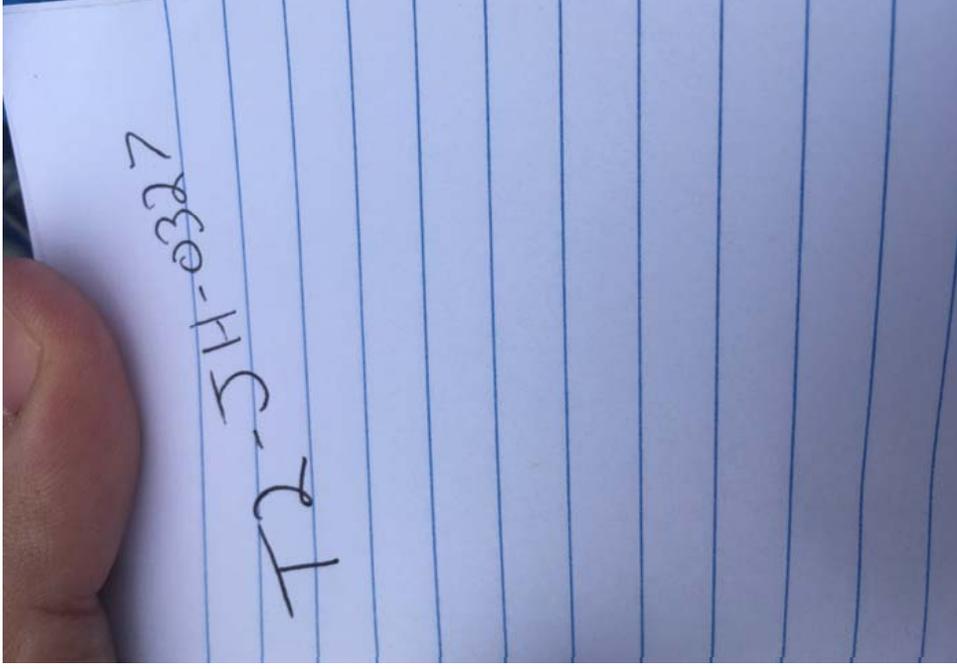
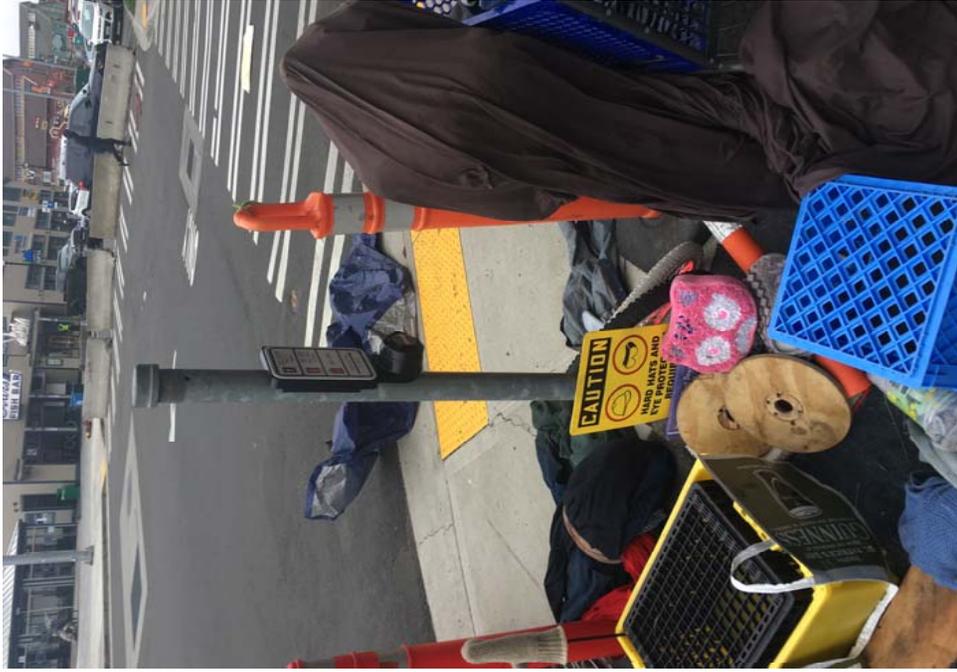








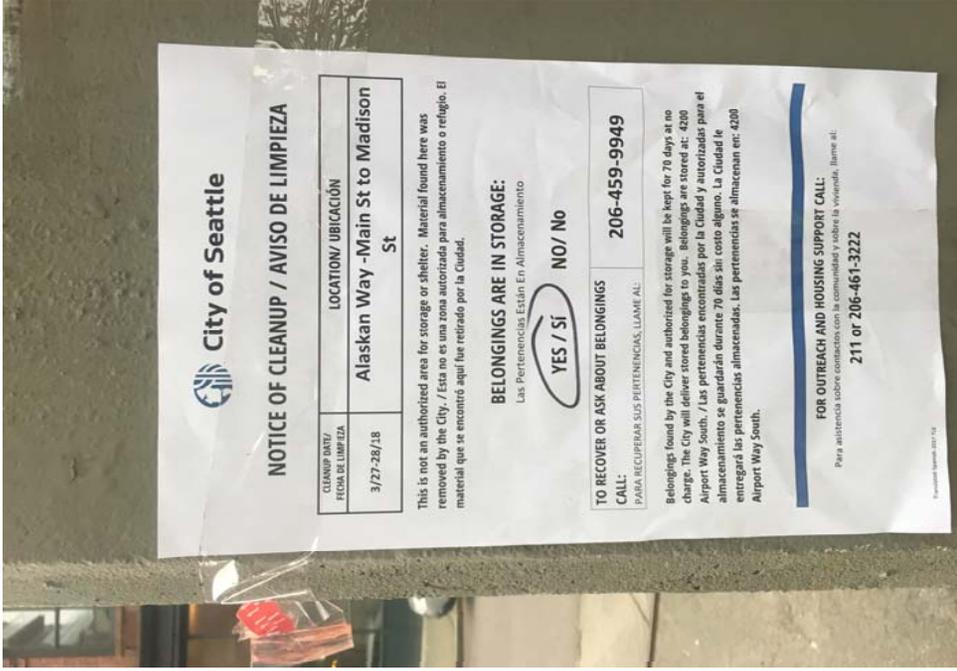










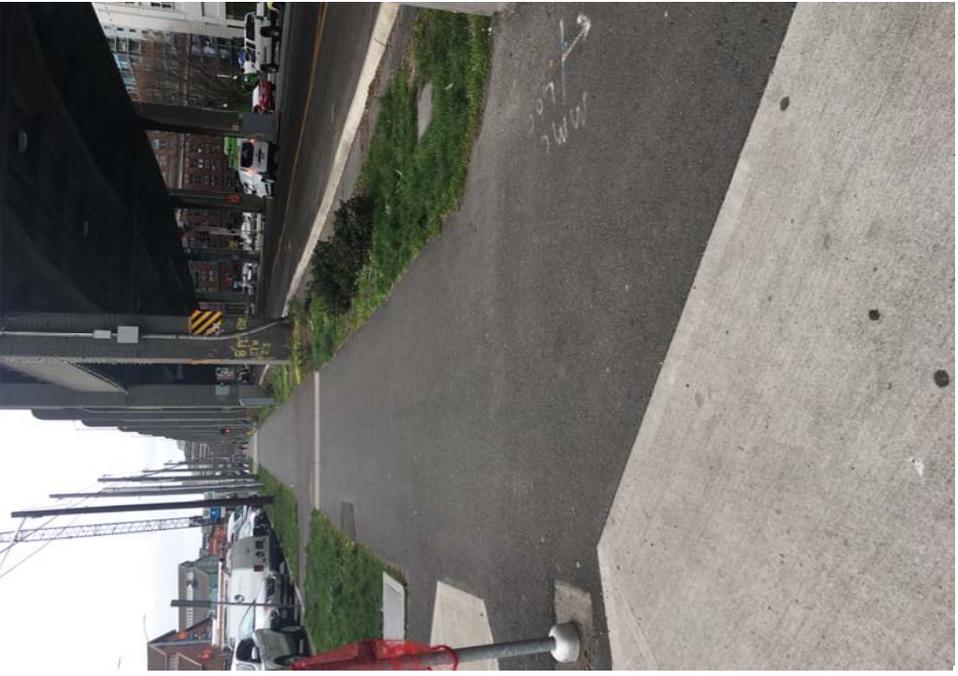












Site Name: Alaskan Way

 Date of Clean Up: 3/27/18

 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
Found in Debris	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged	0	0	0	1	Electric wheel chair
Found in Debris	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged	1	0	0	1	Black wheel chair, leather jack
T1-JL-0327	<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] stated all left behind was garbage
T2-JL-0327	<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, rotting food, syringes inside
T3-JL-0327	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input checked="" type="checkbox"/> Damaged	0	0	0	0	Nothing storable-tent ripped, moldy wet bedding
T4-JL-0327	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input checked="" type="checkbox"/> Damaged	1	0	0	0	FC inventoried tent and stored small bag of clothes- during clean owner showed up and took a portion of the property FC stored. She asked FC to store the rest. [REDACTED]

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-JH-0327	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input checked="" type="checkbox"/> Damaged	0	0	0	1	Wood structure not stored, stored blue wheelchair/cart
T2-JH-0327	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input checked="" type="checkbox"/> Damaged	0	0	0	0	Tented ripped and damaged and nothing storable inside
	<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					
	<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					

