**Local Jurisdiction Situational Awareness Report**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Contact Information: (Provide as much information as possible.)**

|  |  |  |  |
| --- | --- | --- | --- |
| **County:** | | **Jurisdiction:** | |
| **Name:** | **Title:** | | **Phone:** |
| **Email:** | **Fax #:** | | **Cell:** |

**Local Emergency Operations Center Status:**

|  |  |  |  |
| --- | --- | --- | --- |
| **LEOC Activated: YES NO** | | **Hours of Operation:** | |
| **Contact Name:** | | **Title:** | |
| **Telephone:** | **FAX:** | | **Cell:** |
| **LEOC Physical Location:** | | | |

**Situation Summary: (Summarize the impact the disaster event had on the listed topics.)**

|  |  |
| --- | --- |
| **Summary of Event: (Include date & time of actual event.)** | |
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|  | |
| **Fatalities:** | **Injuries:** |
|  | |
| **Shelter Status: (Number of open shelters, location of shelters, people in shelters, etc.)** | |
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|  | |
| **Primary Home/Business Damage:** | |
|  | |
|  | |
| **Power Outages:** | |
|  | |
|  | |
| **Medical/Fire/LE Issues:** | |
|  | |
|  | |
| **Utility (Electric, Water, Sewage) Issues:** | |
|  | |
|  | |
| **Road/Bridge Issues:** | |
|  | |
|  | |

**Local Actions:** **(What actions have you taken?)**

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| --- |
| **Summary of Actions Taken:** |
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|  |

**\*\*\*This is a situational awareness document ONLY. To request resources from the state, you MUST complete and submit a separate “Resource Request Form”. Submit a “Local Jurisdiction Damage Assessment Summary” as detailed information becomes available.\*\*\***

**SEMA FAX #: (573) 634-7966**