## CERT Report Date/Time: (automatic fill) GPS Location: (automatic fill) \*dropdown\* **CERT Group Number? CERT Squad Name?** \*dropdown\* How many times have you \*dropdown\* visited this address? \*dropdown\* Road Access Conditions \*text entry box\* Please enter the address: What type of \*dropdown\* building/structure is it? What is the structure's \*dropdown\* condition? \*dropdown\* Any FIRE present? Any PROPANE or GAS \*dropdown\* hazards present? Any WATER hazards \*dropdown\* present? Any ELECTRICAL hazards \*dropdown\* present? Any CHEMICAL hazards \*dropdown\* present? How many rescued people \*dropdown\* are GREEN: \*scrolling pane\* Please complete required sections

CERT Report Date/Time: (automatic fill) GPS Location: (automatic fill) \*scrolling pane\* How many rescued people \*dropdown\* are YELLOW: How many rescued people \*dropdown\* are RED: How many rescued people \*dropdown\* are DECEASED: Describe the location of the \*text entry box\* DECEASED: Number of TRAPPED \*dropdown\* people: Number of people needing \*dropdown\* SHELTER: Additional notes: (optional) \*text entry box\* Photos: \*take/upload photo\* (optional)  $\oplus$ **File Report**