Santa Clara OA Shelter Status		WebEOC: 20130814 PDF: 190619		
Radio Operator Only:	Origin Msg #:	Destination Msg #:		

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Ini	s Section t	o be C	<u>ompieted i</u>	by Sneite	<mark>er Managem</mark>	ent Pe	rsonnei:		( <u>Underlined=Required</u> )
Dat	<u>e</u> :		<u>Time</u> (24hr	·):	Handling:	Olmr	nediate (ASAP)	OPriority (<1 hr)	ORoutine (<2 hr)
	ICS Position	<u>on</u> :				F	ICS Position:		
Т	<b>Location</b> :					R	Location:		
0	Name:			0	Name:				
	Contact Ir	ıfo:				M	Contact Info:		
Rep	ort Type:	Oup	date Oco	omplete tructions!	Shelter Nan	<u>ne</u> :			
Sho	elter						(If Rep	oort Type=Complete, the	en <u>Underline=Required</u> )
She	lter Type:	(Pick	(One)	Отуре 1	Оту	pe 2	Отуре 3	Отуре 4	
Stat	tus:	(Pick	(One)	Open (	Green) Ocio	<b>osed</b> (Re	d) <b>OFull</b> (Yell	ow)	
Add	lress:								
City	<u>'</u> :								
Stat	te:								
Zip:									
Lati	tude (d.ddd	l°):				Lon	gitude (d.ddd°):		
She	elter Info	rmat	ion				(If Rep	oort Type=Complete, th	en <u>Underline=Required</u> )
<u>Cap</u>	acity:								
<u>Occ</u>	upancy:								
Mea	als Served	(Last 24	1 hours):						
NSS	Number:								
Pet	Friendly:		(	Oyes C	No				
Bas	ic Safety In	spectio	on: (	Oyes C	No				
	C-20 Inspec		(	Oyes C	No				
Ava	ilable Serv	ices:							
MO	U (where/	how se	nt):						
	orplan (who								
	2. M.M. / AAII	c,o							

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Santa Clara OA Shelter Status

Radio Origin Msg #: **Contact Information** (If Report Type=Complete, then <u>Underline=Required</u>) **O**Community **O**Private OAmerican Red Cross Managed By: (Pick One) Oother OGovernment Managed By Detail: **Primary Contact: Primary Contact Phone: Secondary Contact: Secondary Contact Phone: Amateur Radio Information** (If Report Type=Complete, then <u>Underline=Required</u>) **Tactical Call Sign: Repeater Call Sign:** Input: Frequency (MHz): **Tone or Code: Output:** Frequency (MHz): Tone or Code: (MHz, or "+" or "-" for std): Offset: **Comments** (If Report Type=Complete, then <u>Underline=Required</u>) **Comments:** Oyes ONo **Remove from List:** 

Radio Operator Only:						
Relay:	lay: Rcvd:			Sent:		
Name:		Call Sign:		Date:	Time (24hr):	

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## **Instructions: Santa Clara OA Shelter Status**

**Purpose:** This Santa Clara OA Shelter Status form is used to send WebEOC Shelter Status board information via alternative means (radio, fax, e-mail, ...) when direct access to WebEOC is not available.

## **Instructions for Shelters:**

Field	Instructions			
Date	Required. Enter the date created.			
Time	Required. Enter the time created. Use 24-hour time.			
Handling	Required. Select one. Radio operator can suggest an appropriate value.			
	Messages are sent in priority order and as soon as possible. Indicated times are approximate			
	maximum wait times if radio net is busy.			
TO / FROM	If needed, radio operator can suggest most appropriate TO position and location.			
ICS Position	Required. Enter the ICS position name.			
Location	Required. Enter the location.			
Name	Optional. Enter only if the message is to a specific individual.			
Contact Info	Optional. Enter a phone number, frequency or other info that may help reach the person or			
	position.			
Report Type	<ul> <li>Update: Normal mode. Recipient should only replace fields in WebEOC that are entered here. Other fields should retain their current values. To tell the recipient to clear a text field in WebEOC, write "{CLEAR}" in the field. To append to existing data in a WebEOC text field, write "{APPEND}", followed by the text to be appended.</li> <li>Complete: <u>Use with caution</u>. An empty field here tells the recipient to clear the field in WebEOC. Use this to ADD a new shelter, or to replace all fields in WebEOC with the data provided here, or to report on the current status of all WebEOC fields.</li> </ul>			
Shelter Name	Required.			
Shelter	If Report Type = Complete, then <u>Underlined fields are Required</u> . Otherwise, optional.			
Shelter Info	If Report Type = Complete, then <u>Underlined fields are Required</u> . Otherwise, optional.			
Contact Info	If Report Type = Complete, then <u>Underlined fields are Required</u> . Otherwise, optional.			
Amateur Radio Info				
	For "Tone or Code", enter the analog CTCSS tone, or P25 NAC, or DMR TS/TG/CC, or other			
	digital mode access details. For "Offset", enter the value in MHz, or use "+" or "-" for standard			
	offsets.			
Comments	If Report Type = Complete, then <u>Underlined fields are Required</u> . Otherwise, optional.			

## **Instructions for Radio Operators:**

Field	Instructions	
Origin Msg #	Required. Enter the message number of the original sending station.	
Destination Msg #	Required. Enter the message number of the ultimate destination station.	
Relay	When relaying: Enter a call sign and/or time, or other useful mark or info, to indicate status.	
Name	Required. Enter the first initial and last name of the radio operator that handled the message.	
Call Sign	Required. Enter the call sign of the radio operator that handled the message.	
Date	Required. Enter the date the message was sent/received.	
Time	Required. Enter the time the message was sent/received. Use 24-hour time.	

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