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Situation Report			Veoci: 20250702
Situation Report			PDF: 20250730
Radio Operator Only:	Origin Msg #:	Destination. Msg #:	

This Section to be Completed by Jurisdiction/Field Personnel: (Underlined=Required)								
Date	<u>2:</u>	Time: (24hr):		Handling: Olmmediate (ASAP)		OPriority (<1 hr)	ORoutine (<2 hr)	
	ICS Position:				_	ICS Position:		
Т	Location:				F R	Location:		
0	Name:				0	Name:		
	Contact Info				M	Contact Info:		
Ove	erview							
Prep	ared Date:		F	Prepared Ti	me:			
Juris	diction:				<u> 1</u>	ncident Name:		
Eme	rgency Declar	ation: O	Unknov	vn	0	Yes	O No	
EOC	Activation:	O Norma		O Du	-	fficer	O Monitor	
	lent Description	O Partial		O Fu	II			
Additional Incident Information:								
Rep	orted By							
Prepared By: Contact Number:								
Ema	il:							
Gov	Government Office Status							
Offic	ce Status	O Unknov	wn	O o <sub>r</sub>	oen .	O cı	losed	
Ехре	Expected to Open Date: Time: Expected to Close Date: Time:				ne:			
Approved By								
Арр	Approved By: Contact Phone:							
ICS F	Position:				ı	ocation:		

SCCo ARES/RACES

Situation Report Radio Origin Msg #: \_\_\_

<b>Current Situation</b>				
	Status: O Normal	O Problem	O Failure	O Unknown
Communications	Comments:			
	Status: O Normal	O Problem	O Failure	O Unknown
Debris	Comments:			
	Status: O Normal	O Problem	O Failure	O Unknown
Flooding	Comments:			
	Status: O Normal	O Problem	O Failure	O Unknown
HazMat	Comments:			
	Status: O Normal	O Problem	O Failure	O Unknown
Emergency Services	Comments:			
	Status: O Normal	O Problem	O Failure	O Unknown
Causalities	Comments:			
	Status: O Normal	O Problem	O Failure	O Unknown
Utilities (Gas)	Comments:			
	Status: O Normal	O Problem	O Failure	O Unknown
Utilities (Electric)	Comments:			
, .	Status: O Normal	O Problem	O Failure	O Unknown
Infrastructure (Power)	Comments:			
Infrastructure (Water	Status: O Normal	O Problem	O Failure	O Unknown
Systems)	Comments:			
Infrastructure (Sewer	Status: O Normal	O Problem	O Failure	O Unknown
Systems)	Comments:			
	Status: O Normal	O Problem	O Failure	O Unknown
Search and Rescue	Comments:			
	Status: O Normal	O Problem	O Failure	O Unknown
Transportation (Roads)	Comments:			
	Status: O Normal	O Problem	O Failure	O Unknown
Transportation (Bridges)	Comments:			

SCCo ARES/RACES

Situation Report			Radio O	igin Msg #:	
	Status: O N	ormal O Proble	em O Failure	O Unknown	
Civil Unrest	Comments:				
	Status: O N	ormal O Proble	em O Failure	O Unknown	
Animal Issues	Comments:				
Lifeline Status					
<u>Lifeline Status</u> :	O Stable O	Stabilizing O U	nstable O Un	known	
<u>Update</u> :					
<b>Unmet Needs</b> :					
Radio Operator O	nlv:				
Relay: Rcvd:	iny.		Sent:		
-				<b>L.</b>	
Name:		Call Sign:	Date:	Time (24)	nr):

## **Instructions: Situation Report**

**Purpose:** This Situation Report form is used to send Situational Awareness information from a jurisdiction to the County Operational Area. This form conveys details of the incident, EOC activation levels, infrastructure statuses, and descriptive paragraph or bulleted list of both current status and unmet needs.

## **Instructions for Jurisdictions** (only some fields documented here):

Field	Instructions		
Date & Time	Required. Enter the date and time created (use 24hr time).		
Handling	Required. Select one. Messages are sent in priority order and as soon as		
	possible. Indicated times are approx. maximum wait times if radio net is busy.		
TO / FROM	If needed, radio operator can suggest most appropriate TO position / 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.		
<u>Jurisdiction</u>	Required. Enter the name of the municipality/jurisdiction.		
Incident Name	Required. Enter the name of this jurisdiction's incident.		
<b>Emergency Declaration</b>	Please check the status of the jurisdiction's declaration of an emergency.		
EOC Activation	Indicate the activation level of the EOC.		
Incident Description	Please describe the incident.		
Prepared By/Number/Email	Enter the name and contact details for the author of this report.		
Office Status	Enter the status of the jurisdiction's office.		
Expected to Open Date/Time	If the government offices are closed due to this incident, please fill in the date		
	and time it is expected to open.		
Expected to Close Date/Time	If the government offices are planning on closing due to this incident, please		
	fill in the date and time it is expected to close.		
Approved by, Contact Phone, ICS	Provide the details of the jurisdiction's staff member who has approved this		
Position, Location	report for dissemination.		
Current Situation	For each infrastructure item, please fill out only relevant sections (or sections		
	that have changed their status). Provide the status and descriptive comments.		
<u>Lifeline Status</u>	Required. Provide the status of the jurisdiction's response to this incident.		
<u>Update</u>	Required. Provide sufficient detail of the jurisdiction's response and recovery		
	efforts of this incident. This can be a paragraph or bulleted list.		
Unmet Needs	Required. Provide a listing of all shortcomings from this jurisdiction's response		
	and recovery efforts. This is usually a bulleted list of needs the jurisdiction		
	wishes to advise the OA.		

## **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.