

CPOD Site Information Form

Veoci: 20250715

PDF: 20250730

Radio Operator Only:

Origin Msg #:

Destination Msg #:

This Section to be Completed by Jurisdiction Personnel:

(Underlined=Required)

Date:Time: (24hr):Handling: ☐ Immediate (ASAP) ☐ Priority (<1 hr) ☐ Routine (<2 hr)ICS Position:Location:Name:Contact Info:F
R
O
MICS Position:Location:Name:Contact Info:

General Site Information

Jurisdiction:Prepared Date:Prepared Time:Site Name:CPOD Type:☐ Type I☐ Type III☐ Non-CPOD Distribution Point☐ Type II☐ LSA (Logistics Staging Area)

(smaller than a Type III CPOD)

Status:☐ Activated☐ Pending Demobilization☐ Not Activated☐ Pending Activation☐ DemobilizationAddress:City:ZIP code:

Police Jurisdiction and Division/Region:

Fire Department Jurisdiction and Division/Region:

Additional Information:

Contact Information

Partner Point of Contact:

Site Point of Contact:

Site Details

Dimensions of Site in Feet:

Size of Site in Acres:

Road/Walkway Type: ☐ Concrete ☐ Gravel Hard-Stand ☐ Paved ☐ OtherAccessible at All Times: ☐ Yes ☐ NoAccess Controlled by Gate: ☐ Yes ☐ No

Site Contact if Gate is Closed:

Location of Driveway(s)

Spike Strips at any of the driveways: ☐ Yes ☐ No

Site Safety

Site Safety Details:

☐ Has perimeter fencing☐ Has public address system installed☐ Has fixed lighting throughout the site (outside)☐ Has covered areas☐ Has fixed lighting throughout the site (inside)☐ Has fixed or non-fixed equipment located on the site that may be difficult to move☐ Site monitored by closed-circuit TV cameras

Perimeter Fencing Details:

Site Accessibility:

☐ There are sidewalks leading to the site have wheelchair access☐ There are uneven surfaces leading up to the site

There is a ramp from the staff parking location leading up to the POD location

CPOD Site Information Form

Time Opened / Time Closed			
Date Opened:		Time Opened:	
Date Closed:		Time Closed:	
Commodities			
Item 1	Type of Commodity:		
	Starting Quantity:	Qty Distributed:	Qty Available:
Item 2	Type of Commodity:		
	Starting Quantity:	Qty Distributed:	Qty Available:
Item 3	Type of Commodity:		
	Starting Quantity:	Qty Distributed:	Qty Available:
Item 4	Type of Commodity:		
	Starting Quantity:	Qty Distributed:	Qty Available:
Item 5	Type of Commodity:		
	Starting Quantity:	Qty Distributed:	Qty Available:
Item 6	Type of Commodity:		
	Starting Quantity:	Qty Distributed:	Qty Available:
Item 7	Type of Commodity:		
	Starting Quantity:	Qty Distributed:	Qty Available:
Item 8	Type of Commodity:		
	Starting Quantity:	Qty Distributed:	Qty Available:

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

SCCo ARES/RACES

Instructions: CPOD Site Information Form (Commodity Point of Distribution)

Purpose: This CPOD form identifies the location of a CPOD and initial list of commodities with beginning quantities on hand. Although the site details are optional, filling in with the best information at hand is beneficial to all. They are valuable to assist in understanding the physical properties of the site, security requirements, and such.

Instructions for Jurisdictions:

Field	Instructions															
Date	<u>Required</u> . Enter the date created.															
Time	<u>Required</u> . Enter the time created. Use 24-hour time.															
Handling	<u>Required</u> . Select one. 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	<u>Required</u> . Enter the ICS position name.															
Location	<u>Required</u> . 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.															
Jurisdiction	<u>Required</u> . Enter the name of the municipality/jurisdiction.															
Prepared Date/Time	<u>Required</u> . Enter the date and time of this form creation. Use 24-hour time.															
Site Name	<u>Required</u> . Enter a name for this site (such as: Vasona Lake Park, or Fairgrounds)															
CPOD Type	<u>Required</u> . <table border="1"> <tbody> <tr> <td><u>Type I C-POD</u></td><td>250 ft. x 500 ft.</td><td> <ul style="list-style-type: none"> Requires a staff of 78 per day Type I PODs are only used in large metro areas Twelve loading points and four vehicle lanes are used </td></tr> <tr> <td><u>Type II C-POD</u></td><td>250 ft. x 300 ft.</td><td> <ul style="list-style-type: none"> Requires a staff of 34 per day Six loading points and two vehicle lanes are used </td></tr> <tr> <td><u>Type III C-POD</u></td><td>150 ft. x 300 ft.</td><td> <ul style="list-style-type: none"> Requires a staff of 19 per day Three loading points and one vehicle lane are used </td></tr> <tr> <td>LSA (Logistics Staging Area)</td><td></td><td> <ul style="list-style-type: none"> As a general guideline, between 40 and 172 personnel should be assigned. In extreme circumstances, this may be scaled down to 20, or scaled up to 183 personnel. </td></tr> <tr> <td>Non-CPOD Distribution Point</td><td></td><td> <ul style="list-style-type: none"> A non-planned distribution point for smaller operations, smaller than a Type III CPOD. </td></tr> </tbody> </table>	<u>Type I C-POD</u>	250 ft. x 500 ft.	<ul style="list-style-type: none"> Requires a staff of 78 per day Type I PODs are only used in large metro areas Twelve loading points and four vehicle lanes are used 	<u>Type II C-POD</u>	250 ft. x 300 ft.	<ul style="list-style-type: none"> Requires a staff of 34 per day Six loading points and two vehicle lanes are used 	<u>Type III C-POD</u>	150 ft. x 300 ft.	<ul style="list-style-type: none"> Requires a staff of 19 per day Three loading points and one vehicle lane are used 	LSA (Logistics Staging Area)		<ul style="list-style-type: none"> As a general guideline, between 40 and 172 personnel should be assigned. In extreme circumstances, this may be scaled down to 20, or scaled up to 183 personnel. 	Non-CPOD Distribution Point		<ul style="list-style-type: none"> A non-planned distribution point for smaller operations, smaller than a Type III CPOD.
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Status	<u>Required</u> . Select one. Please select the status that best matches the current status of this CPOD.															
Address, City, ZIP Code	The Address and City fields are <u>required</u> : Please specify the correct address for this site. It is best to use addresses and not cross streets to ensure the public and logistics can locate this site.															
Police and Fire Jurisdiction	Enter the law enforcement and fire agency having authority over this site.															
Additional Information	Enter any additional information that would be relevant to the operation of this site.															
Partner and Site Point of Contact	Please fill in the partner agency managing this site as well as the site supervisor. Contact information for each would be beneficial.															

Site Details	It would be appreciated if this was filled out to the best of your abilities. This shares information on the facility size, accessibility, and description of the site.
Site Safety	It would be appreciated if this was filled out to the best of your abilities. It contains additional details focused on safety items.
Date/Time Opened	This is where you fill in the date and time when the site is expected to be open.
Date/Time Closed	This is where you fill in the date and time when the site is expected to close.
Commodities	<p><u>Required.</u> Please fill in a list of all commodities with the start of day quantity on hand, quantity distributed, and resulting quantity on hand as of the time this form was filled out.</p> <p>If more than 8 commodities are being distributed, please fill out an additional form and mark the bottom of each form page as <i>page number of number</i> (such as “1 of 2”).</p>

Instructions for Radio Operators:

Field	Instructions
Origin Msg #	<u>Required.</u> Enter the message number of the original sending station.
Destination Msg #	<u>Required.</u> 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	<u>Required.</u> Enter the first initial and last name of the radio operator that handled the message.
Call Sign	<u>Required.</u> Enter the call sign of the radio operator that handled the message.
Date	<u>Required.</u> Enter the date the message was sent/received.
Time	<u>Required.</u> Enter the time the message was sent/received. Use 24-hour time.