

Alaska ERG for Small Communities

APPENDIX H

INITIAL ASSESSMENT REPORT

| | | | |
|---|------------|--|-------------|
| Reporting location <u>Shaktolik</u> | | 9/19/22 12:34pm | |
| <small>(Name of village/city/borough)</small> | | <small>Date & time</small> | |
| Reported By: <u>Lars Sookiyak</u> | | <u>City Mayor</u> | |
| <small>(Name)</small> | | <small>Title</small> | |
| Area(s) affected <u>Shorefront berm, Ocean side Leech pits, water source 1st & 2nd Bend, and Safety Access Road</u> | | | |
| Type of Disaster/Emergency <u>Flood & Erosion</u> | | | |
| <small>(e.g., flood, fire, windstorm, earthquake, landslide)</small> | | | |
| Casualties | | | |
| <small>(Insert appropriate numbers into the space provided)</small> | | | |
| A. Deceased | <u>0</u> | D. Missing | <u>0</u> |
| B. Injured | <u>0</u> | E. Require medical help | <u>6</u> |
| C. Endangered | <u>270</u> | F. Trapped/Isolated | <u>0</u> |
| Evacuation and Sheltering | | | |
| <small>(Insert appropriate numbers into the space provided)</small> | | | |
| A. Total population sheltered | <u>150</u> | C. Homes evacuated | <u>45</u> |
| B. Total # shelters open | <u>2</u> | D. # sheltered overnight | <u>150</u> |
| Damage to Private Property | | | |
| INDIVIDUALS | | TRADITIONAL/CULTURAL | |
| A. Homes and Dwellings | <u>0</u> | G. Boats and/or motors | <u>0</u> |
| B. Boats | <u>0</u> | H. Subsistence equipment (Fishing Nets/Wheels) | <u>20</u> |
| C. Vehicles/Four Wheelers | <u>0</u> | I. Fish Camps/Drying Racks | <u>4</u> |
| D. Private Property | <u>30</u> | J. Berry-picking areas | <u>many</u> |
| BUSINESS/COMMERCIAL | | K. Cemetery | <u>0</u> |
| E. Rentals/Apartments | <u>0</u> | L. Meeting Halls | <u>0</u> |
| F. Businesses/Stores | <u>0</u> | | |

This report of actual or expected damage should be used to request specific support from the SEOC. It will also save valuable time if the person reporting this information is an ELECTED OFFICIAL with the authority to request assistance

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| <u>Damage to Essential or Lifeline Facilities</u> | |
|--|--|
| (Insert appropriate numbers into the space provided) | |
| <p><u>ESSENTIAL LIFELINES</u></p> <p><input type="checkbox"/> Power Generation and Powerlines _____</p> <p><input type="checkbox"/> Fuel Supply, Storage, and Delivery Systems _____</p> <p><input checked="" type="checkbox"/> Water Production, Treatment, and Storage <u>1</u></p> <p><input type="checkbox"/> Sewage Treatment Facilities _____</p> <p><input type="checkbox"/> Heating Facilities _____</p> <p><input type="checkbox"/> Communication Systems _____</p> | <p><u>CRITICAL FACILITIES</u></p> <p><input type="checkbox"/> Hospitals/Clinics _____</p> <p><input type="checkbox"/> Schools _____</p> <p><input type="checkbox"/> Teacher Housing _____</p> <p><input type="checkbox"/> Community, Tribal, or Government Buildings _____</p> <p><input type="checkbox"/> Fire and Police Stations _____</p> <p><input checked="" type="checkbox"/> Roads/Bridges <u>1</u></p> <p><input type="checkbox"/> Airports/Runways _____</p> <p><input checked="" type="checkbox"/> Levees/Sea Walls <u>2</u></p> |
| <u>Type of Emergency Assistance Needed</u> | |
| (See Table 3: Basic and Immediate Needs List) | |
| <p><u>BASIC NEEDS</u></p> <p><input checked="" type="checkbox"/> Food</p> <p><input checked="" type="checkbox"/> Water</p> <p><input type="checkbox"/> Power</p> <p><input type="checkbox"/> Emergency Shelter</p> <p><input type="checkbox"/> Heat</p> <p><input type="checkbox"/> Fuel</p> <p><input type="checkbox"/> Communication</p> <p><input type="checkbox"/> Sanitation</p> <p><input type="checkbox"/> Safety and Security</p> <p><input type="checkbox"/> Short-Term Medical Care, Equipment, and Supplies</p> <p><input type="checkbox"/> Personal Hygiene</p> <p><input type="checkbox"/> Clothing/Bedding</p> <p><input type="checkbox"/> Mental and Behavioral Health</p> | <p><u>IMMEDIATE NEEDS</u></p> <p><input type="checkbox"/> Situational Awareness</p> <p><input type="checkbox"/> Accountability</p> <p><input checked="" type="checkbox"/> Evacuation</p> <p><input checked="" type="checkbox"/> Short-Term Shelter</p> <p><input type="checkbox"/> Search and Rescue</p> <p><input type="checkbox"/> Public Safety</p> <p><input type="checkbox"/> Emergency Medical Care</p> <p><input type="checkbox"/> Incident/Emergency Management</p> <p><input type="checkbox"/> Oil/Fuel Spills, Haz Mat, and Chemical Release Response and Cleanup</p> <p><input type="checkbox"/> Emergency and Public Information</p> <p><input type="checkbox"/> Critical and Prescribed Medications</p> <p><input type="checkbox"/> Flood-Fighting Resources</p> <p><input checked="" type="checkbox"/> Debris Clearance and Removal</p> |
| <u>Debris Management</u> | |
| (Explain in Remarks Section) | |
| Are there large accumulations of debris? Yes: <input checked="" type="checkbox"/> No: _____ | |
| Is there a need for emergency debris clearance? Yes: <input checked="" type="checkbox"/> No: _____ | |

