## SITE INSPECTION REPORT

### FACILITY DESCRIPTION

<table>
<thead>
<tr>
<th>Applicant:</th>
<th>FIPS#:</th>
<th>Applicant Representative:</th>
<th>Site Inspector:</th>
</tr>
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<tbody>
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<table>
<thead>
<tr>
<th>Applicant Address:</th>
<th>City:</th>
<th>State:</th>
<th>Zip Code:</th>
<th>Site Inspection Date:</th>
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<table>
<thead>
<tr>
<th>GPS:</th>
<th>LAT</th>
<th>LONG</th>
<th>Date Damaged</th>
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<tbody>
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| Physical Location/Address: | |
|---------------------------| |
|                           | |

<table>
<thead>
<tr>
<th>Purpose:</th>
<th>Water Treatment</th>
<th>Water Collection &amp; Distribution</th>
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<tbody>
<tr>
<td>Wastewater Treatment</td>
<td>Wastewater Collection &amp; Distribution</td>
<td></td>
</tr>
<tr>
<td>Water Storage</td>
<td>Natural Gas Transmission &amp; Distribution</td>
<td></td>
</tr>
<tr>
<td>Power Generation</td>
<td>Power Transmission &amp; Distribution</td>
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<tr>
<td>Communication</td>
<td>Other (Specify):</td>
<td></td>
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<thead>
<tr>
<th>Legal Responsibility?</th>
<th>Yes</th>
<th>No</th>
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<tr>
<th>SCADA</th>
<th>Yes</th>
<th>No</th>
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**Facility Description:** (Pre-disaster design, function, capacity, and dimensions)

*Facility Description Only (Capture Damages on Next Page)*

Applicant Representative Signature__________________________

Page 1 of _____
<table>
<thead>
<tr>
<th>Site #</th>
<th>Damage Component</th>
<th>Location (Address, GPS, begin / end if applicable)</th>
<th>Cause of Damage</th>
<th>Damage Dimensions (L x W x D / L x Dia)</th>
<th>Electrical/Mechanical/etc</th>
<th>Quantity &amp; Units</th>
<th>FA, Contract, or Both</th>
<th>% Work Completed</th>
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Method of Repair Notes & Comments (will there be any change in pre-disaster design, size, capacity or material type, what work has been completed vs what work remains to be done)


Cause of Damage: 1-Surface Water Flooding 2-Wind Driven Rain 3-Sewer Back Up 4-Foundation Seepage 5-Lightning 6-High Winds 7-Tree Damage 8-Wind Blown Debris 9-Earthquake 10-Fire 11-Explosion 12-Other (specify)
### Facility Component Damages

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<tr>
<th>Site #</th>
<th>Damage Component</th>
<th>Location (Address, GPS, begin / end if applicable)</th>
<th>Cause of Damage</th>
<th>Damage Dimensions (L x W x D / L x DIA) Electrical/Mechanical/etc</th>
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### Component Types:
- 1-Pump
- 2-Motor
- 3-Pipe
- 4-Tank
- 5-Valve
- 6-Pole
- 7-Line
- 8-Generator
- 9-Control
- 10-Sensor
- 11-Gauge
- 12-Electrical
- 13-Transformer
- 14-Building
- 15-Road
- 16-Fencing
- 17-SCADA
- 18-Metering Station
- 19-Insulator
- 20-Conductor
- 21-Terminal
- 22-Tower
- 23-Telecommunication
- 24-Clarifier
- 25-Intake System
- 26-Primary Sedimentation
- 27-Chlorination System
- 28-Aeration Tank
- 29-Compressor Station
- 30-Filter
- 31-Effluent Outflow
- 32-Other (Specify)

### Cause of Damage:
- 1-Surface Water Flooding
- 2-Wind Driven Rain
- 3-Sewer Back Up
- 4-Foundation Seepage
- 5-Lightning
- 6-High Winds
- 7-Tree Damage
- 8-Wind Blown Debris
- 9-Earthquake
- 10-Fire
- 11-Explosion
- 12-Other (specify)
**NOTE FOR SITE INSPECTOR:** During the site inspection, please ask the Applicant the following questions. The PDMG may have already asked these questions; however, the Applicant representative at the site inspection may have additional information. Use Notes section on next page if additional space is needed for comments.

1. Does the damaged facility have insurance coverage and/or is it an insurable risk (e.g., buildings, equipment, vehicles)?
   - Unsure
   - Yes
   - No

2. Is the damaged facility(ies) located within a floodplain or a coastal high hazard area and/or does it have an impact on a floodplain or wetland? Can the project site be impacted by flooding? Will work occur within 200 feet of a waterway/waterbody?
   - Unsure
   - Yes
   - No

3. Is the damaged facility located within or adjacent to a Coastal Barrier Resource System Unit or an Otherwise Protected Area?
   - Unsure
   - Yes
   - No

4. Will the proposed facility repairs/reconstruction change the pre-disaster conditions (e.g., footprint – including depth of footprint, material, location, capacity, use or function), including construction of an access road, establishing a staging area, or other work outside of the constructed right-of-way? If yes, describe changes or work outside of the constructed right-of-way. Provide detailed justification for the change (e.g. codes and standards).
   - Unsure
   - Yes
   - No

5. Does the Applicant have a hazard mitigation proposal or would the applicant like technical assistance for hazard mitigation proposal?
   - Unsure
   - Yes
   - No

6. Is the damaged facility(ies) listed on a local/state/national historic register or is it a locally recognized landmark? Is it older than 45 years? (Provide the age of the facility) Are there more, similar buildings near the site?
   - Unsure
   - Yes
   - No

7. Are there any large, undeveloped or undisturbed areas on, or near, the project site? (Select “yes” if there are large tracts of forestland, grassland, or naturally preserved areas, etc.)
   - Unsure
   - Yes
   - No

8. Are there any hazardous materials at or adjacent to the damaged facility?
   - Unsure
   - Yes
   - No

**Applicant Representative Initials______________________________**
9. Are there any other environmental or controversial issues associated with the damaged facility and/or work item? (select yes if facility is a road maintained by a Tribal Government or if the project necessitates the establishment of a new borrow area or the horizontal expansion of an existing borrow area.)

Unsure    Yes    No

List any known endangered species in the work area:

Additional Notes / Comments: