

GENERAL MESSAGE SITREP
TO: STATE OF ALASKA EMERGENCY OPERATIONS CENTER
POSITION:
FROM:
POSITION:
EXERCISE/REAL EVENT: (ONE OR THE OTHER)
SUBJECT: COMMUNITY SITREP
SITREP NO:
SITUATION:
(EARTHQUAKE/Tsunami/WILD FIRE/FLOOD/TERRORISM/AIR CRASH/OTHER)
DATE:
TIME:
MESSAGE:
1. COMMUNITY NAME:
2. COMMUNICATIONS:
A. ARE RADIO OPERATORS IN CONTACT WITH COMMUNITY EMERGENCY MANAGERS: (Y/N)
B. EMERGENCY MANAGER NAME/TELEPHONE:
3. LIFE SAFETY:
A. SHELTER: (PERSONS NEEDED FOR)
B. FOOD: (MEALS NEEDED)
C. POTABLE WATER: (OPERATIONAL/NONOPERATIONAL)
D. SEPTIC SYSTEM: (OPERATIONAL/NONOPERATIONAL)
4. CASUALTIES:
A. TOTAL EST POPULATION: (NUMBER)
B. KNOWN DEAD: (NUMBER)
C. INJURED: (NUMBER)
D. MISSING: (NUMBER)
5. INFRASTRUCTURE:
A. ELECTRIC GRID: (% OPERATIONAL)
B. HOSPITAL: (% OPERATIONAL)
C. TELEPHONE/ALMR/INTERNET: (STATUS)
D. AIRPORT: (OPEN/CLOSED)
E. ROADS: (% OPEN)
F. PORT FACILITIES: (CRANES/PIERS AVAIL)
6. WX:
A. TEMP: (DEG F)
B. WIND: (8 PT COMPASS/SPEED)
C. PRECIP: (RAIN/SNOW)
7. IMMEDIATE NEEDS::
A.
B.
C.
D.
SIGNATURE:
POSITION:
REPLY:
DATE:
TIME:
EXERCISE/REAL EVENT: (ONE OR THE OTHER)
ICS 213 NFES 1336

FORM DATE: 03/01/2010