

B. RESOURCE PLANNING

SITE CREW ASSESSMENT *of* FIELD CONDITIONS

JOB SITE INSTRUCTIONS

Fall Protection Required	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Waste Hauling to Dump	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Waste Hauling to Other Location	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Vegetation Pruning	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Biohazard Waste	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

Specifications/Notes

EXTERNAL CONTRACTORS

	Total	Description
Number of Labor Crew Involved	4	Belfor – Fall Protection
Number of Hazmat Crew Involved	4	Cascadia
Number of Truck Drivers Approved	0	
Number of Full Time Days On-site Approved	3	
Number of Partial Days On-site Approved	0	
Total Hours Approved	24	

INTERNAL CLEAN UP TEAMS

	Total	Description
Number of Heavy Teams	2	
Number of Light Teams	0	
Number of Full Time Days On-site Approved	3	
Number of Partial Days On-site Approved	0	
Total Hours Approved	24	

STAGING LOCATION

Date: 5/15/17 Time: 8:30AM Location: I-90 Cloverleaf/Metro Stairs

C. PRE-CLEAN UP ACTIVITIES

EXHIBIT B: SITE POSTING PHOTOS

- Regular Encampment Clean-up:** 72 hour Notice
 Obstruction or Hazard Clean-up: Notice of Immediate Removal

- Cross Street Signs
- General Photos of the Encampment
- Postings on Individual Tents
- Postings within the Vicinity
- Documentation of the Actual Obstruction or Hazard

Field Coordinators should take photos and collect photos from the Navigation Officers and store them photos in the appropriate G:Drive folder:

EXHIBIT C: OUTREACH REPORT

The Outreach Coordinator will provide a consolidated report for both pre-engagement and day-of activities of the outreach and Navigation team.

D. DAY OF CLEAN-UP

For **regular encampment clean-ups**, all checklist items must be marked “Yes” at the start time of the event in order proceed with the clean-up. If for any reason the of the following questions are answered “No” – **the Field Coordinator must immediately halt the clean-up activities**. Hazard and Obstruction clean-ups are excluded from this.

FIELD COORDINATOR Jeff Horan, James Lohman, Marlan Teeters and William Gholston

CHECKLIST for ENCAMPMENT CLEAN UP

Notice posting is 72 hours in advance of cleanup	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Cleanup is occurring on date specified in notice	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Outreach was provided before the cleanup	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Outreach team is present at cleanup site	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Personnel are ready to identify and collect belongings	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
SPD or WSP officers are present to support cleanup	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Crew is present and ready to support cleanup	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

EXHIBIT D: CLEAN-UP PHOTOS

Field Coordinators are responsible for ensuring that photos are taken to document the clean-up event and saved to the appropriate G:Drive folder. This includes pictures of site conditions, tents, storage and before/after photos.

- Cross Street Signs
- Photos of Tent ID Numbers
- Photos of Storage Bin Contents
- General Photos of the Encampment
- Individual Tent Contents
- After Photos

STORAGE SUMMARY

LOCATION	TOTAL TENTS/STRUCTURES	OWNER PRESENT Accepted Storage	OWNER PRESENT Declined Storage *	NOT PRESENT Storable	NOT PRESENT Not Storable
Poplar/Dean	36	2	25	4	5
I-90 Cloverleaf & Metro Stairs	49	5	24	4	16

* Number represent owners that verbally declined storage and/or removed their items themselves. Exh E. Storage Detail only reflects items stored or documentation of tents/items that were left behind and disposed of.

STORAGE TOTALS

Location	Number of Bins	Bikes	Large Luggage Items	Large Items
Poplar/Dean	14	0	0	2
I-90 Cloverleaf & Metro Stairs	23	5	0	4

EXHIBIT E: STORAGE DETAIL

Field Coordinators are responsible for ensuring that we log information about each tent/structure that is at the clean-up site. This includes regular, obstruction and hazard clean-ups.

EXHIBIT A - INSPECTION I-90 CLOVERLEAF/METRO STAIRS

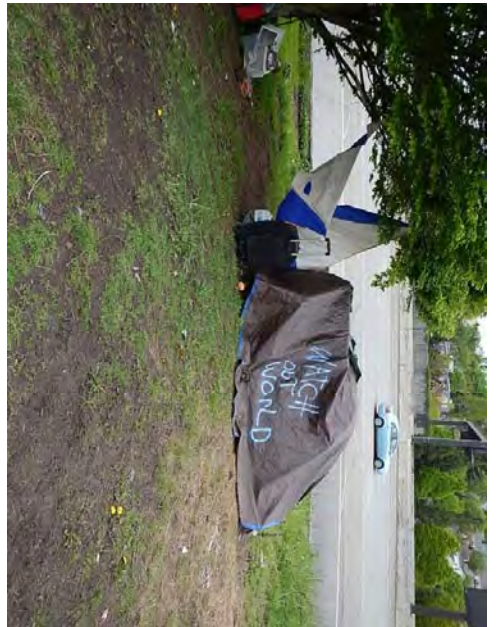








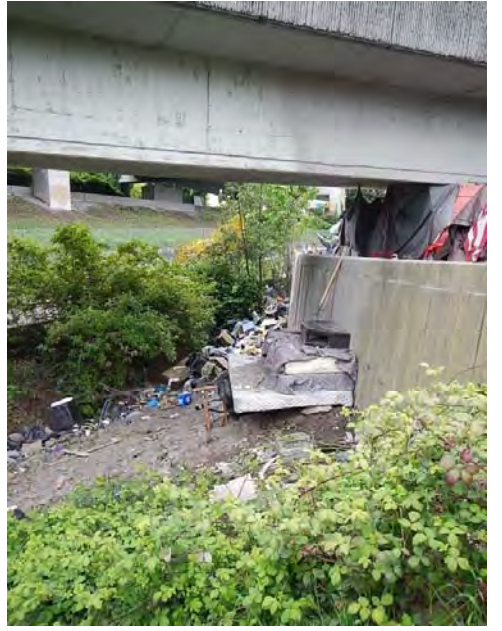


EXHIBIT A - INSPECTION POPLAR & DEAN

















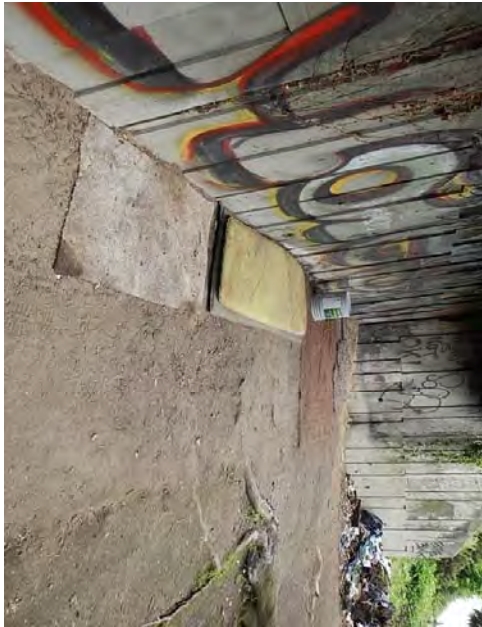
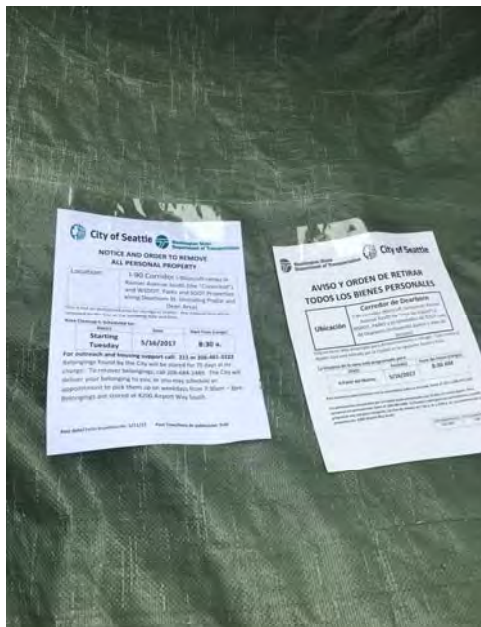
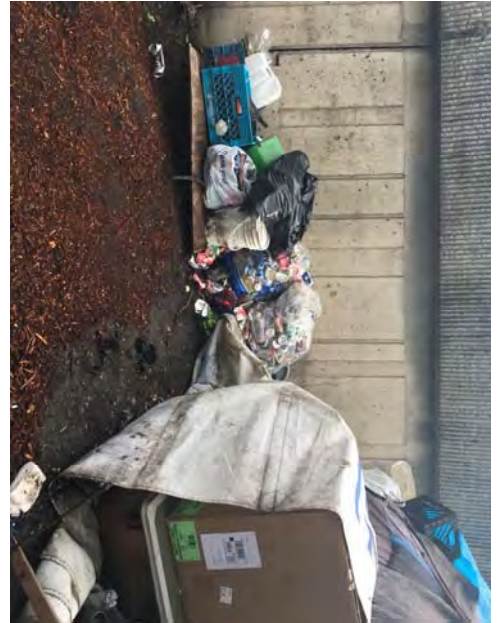
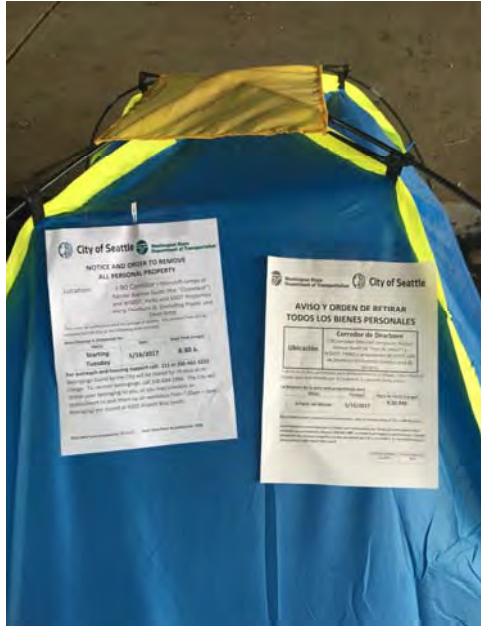
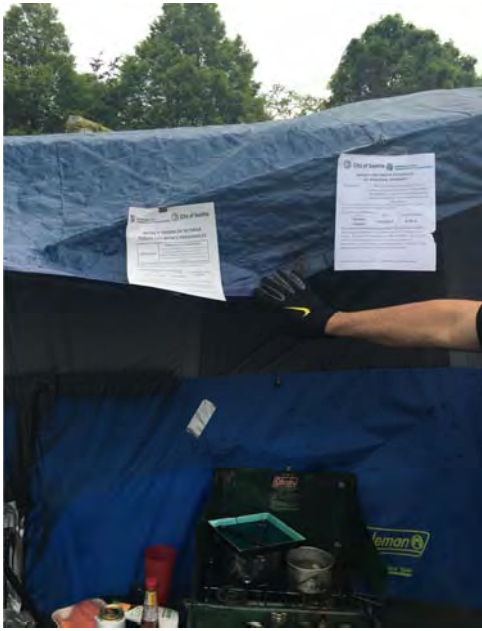


EXHIBIT B - 05/11/17 POSTING





City of Seattle Washington State Department of Transportation

NOTICE AND ORDER TO REMOVE ALL PERSONAL PROPERTY

Location: I-90 Corridor I-90 exit ramps at Rainier Avenue South (the "Cloverleaf") and WOOD, Parks and SODOT Properties along Dearborn St. (excluding Poplar and Dean Aves)

This is not an authorized area for storage of shelter. Any material here will be removed by the City at the following date and time.

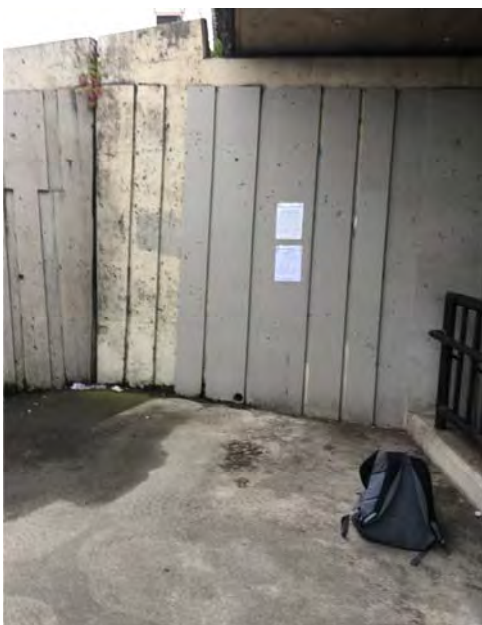
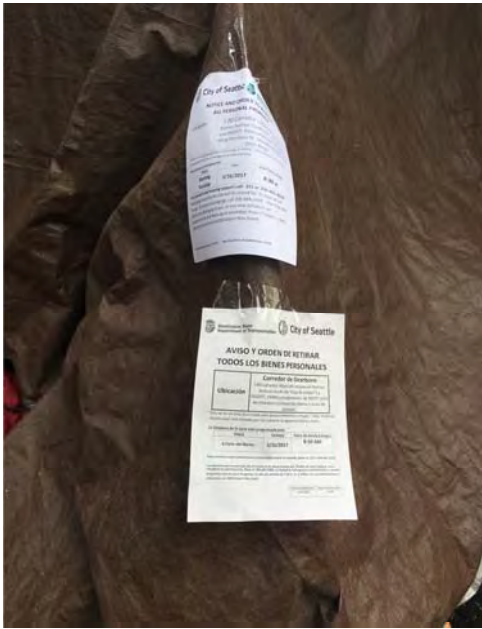
Area Closure is Scheduled for:

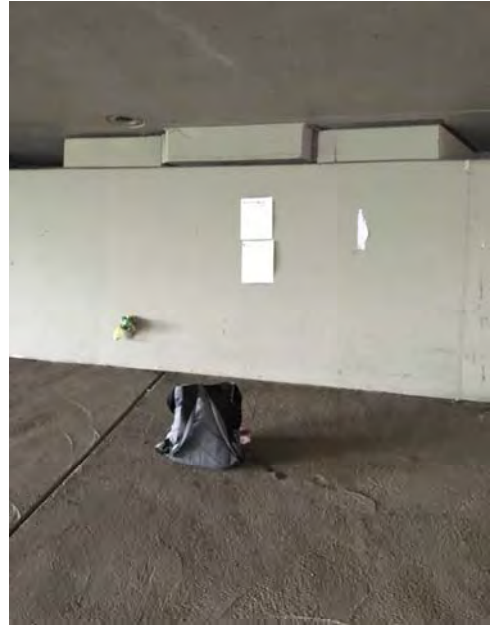
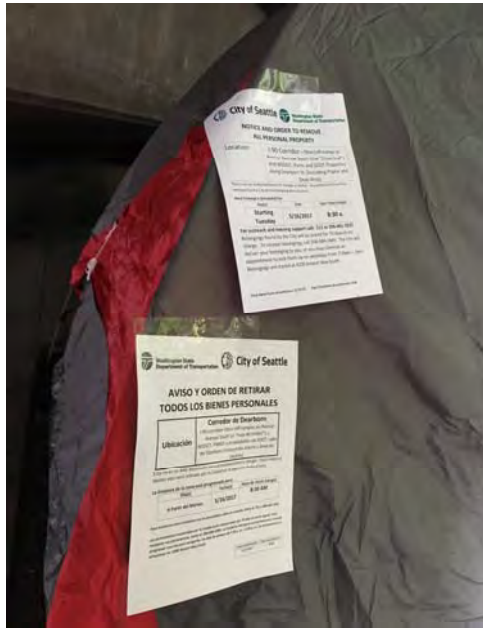
Start	Date	Start Time (approx)
Starting	5/16/2017	8:30 a.
Ending	Tuesday	

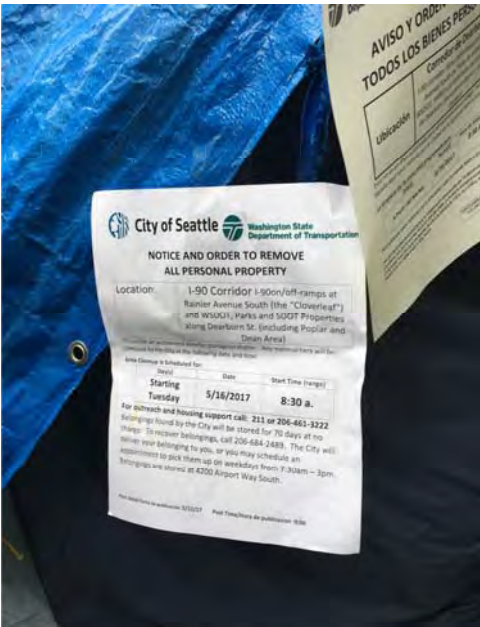
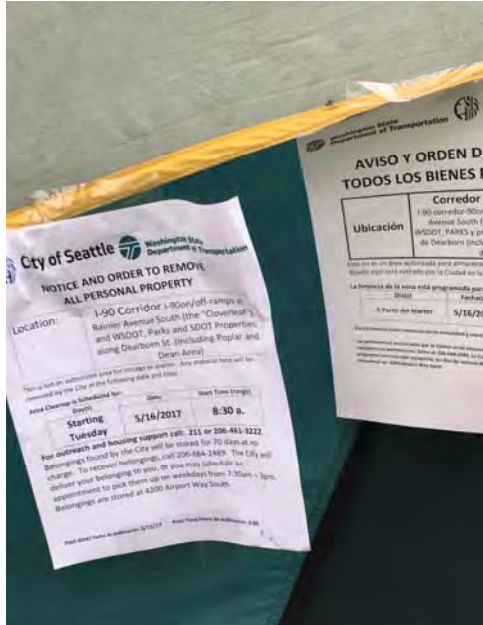
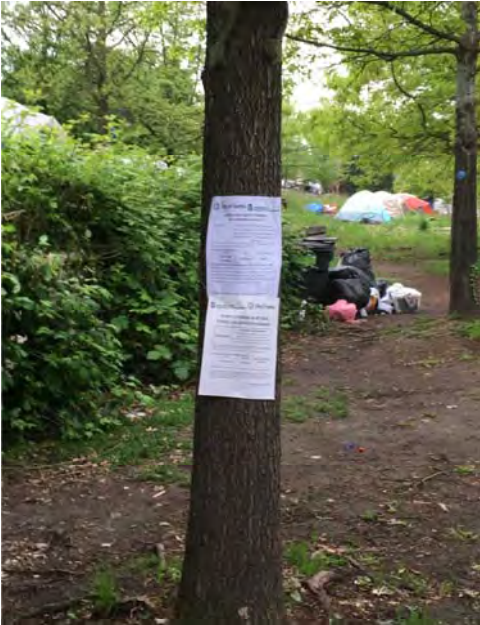
For outreach and housing support call: 311 or 206-461-3222
 Belongings found by the City will be stored for 70 days at no charge. To recover belongings, call 206-684-2489. The City will deliver your belongings to you, or you may schedule an appointment to pick them up on weekdays from 7:30am - 3pm. Belongings are stored at 8200 Airport Way South.

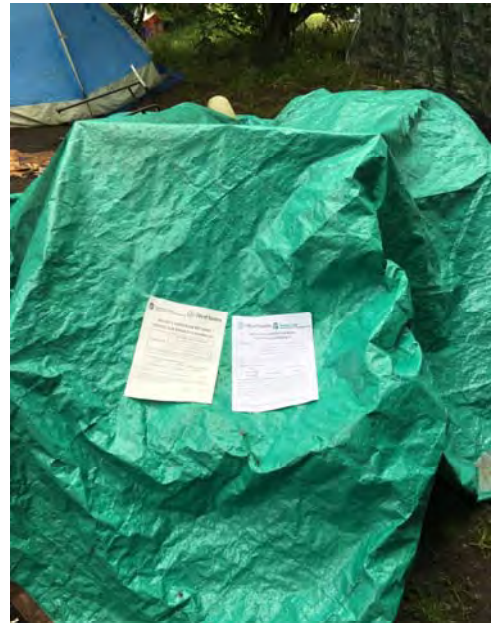
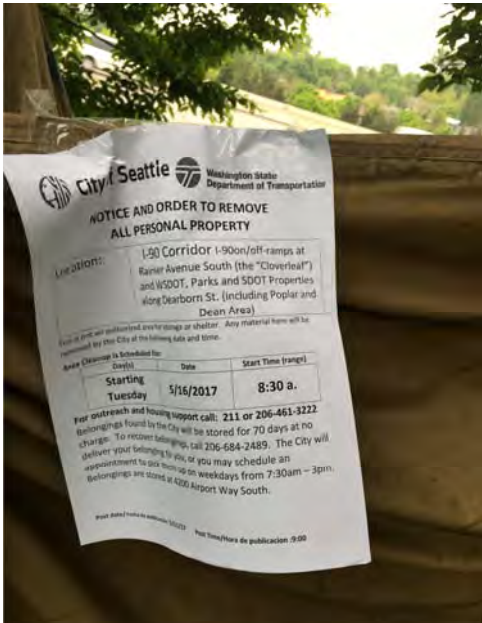
Post this notice on addresses 511137 Post this notice on addresses 511137

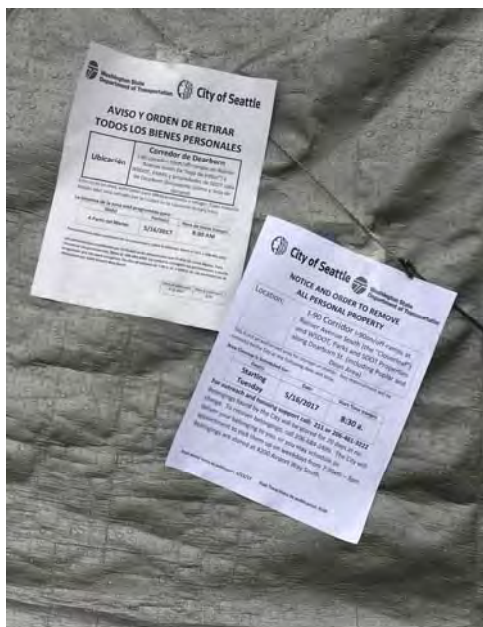
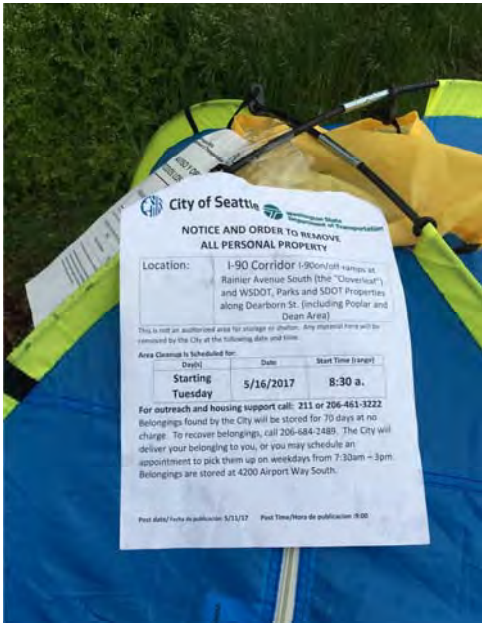


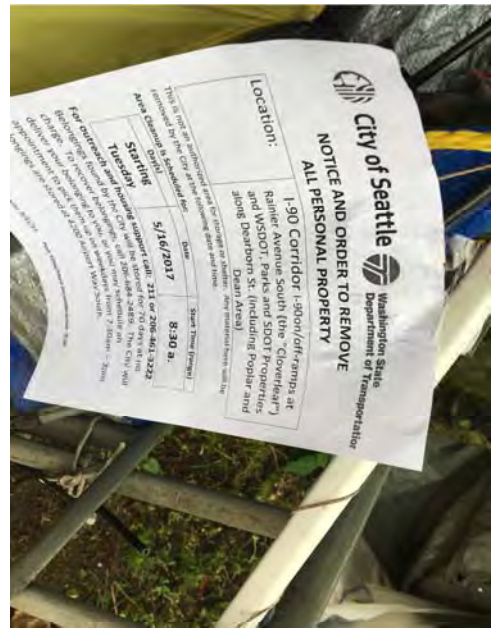














City of Seattle  **Washington State Department of Transportation**

NOTICE AND ORDER TO REMOVE ALL PERSONAL PROPERTY

Location: I-90 Corridor I-90on/off-ramps at Rainier Avenue South (the "Cloverleaf") and WSDOT, Parks and SDOT Properties along Dearborn St. (Including Poplar and Dean Area)

This is not an authorized area for storage or storage. Any material here will be removed by the City at the following date and time.

Area Cleanup is Scheduled for:		
Day(s)	Date	Start Time (range)
Starting	5/16/2017	8:30 a.
Tuesday		

For outreach and housing support call: 211 or 206-461-3332
 Belongings found by the City will be stored for 70 days at no charge. To recover belongings, call 206-684-2489. The City will deliver your belongings to you, or you may schedule an appointment to pick them up on weekdays from 7:30am - 3pm. Belongings are stored at 4200 Airport Way South.

Word Watch Notice of publication: 5/11/17 Post Time/Hours of publication: 8:00



EXHIBIT B - POPLAR DEAN POSTING











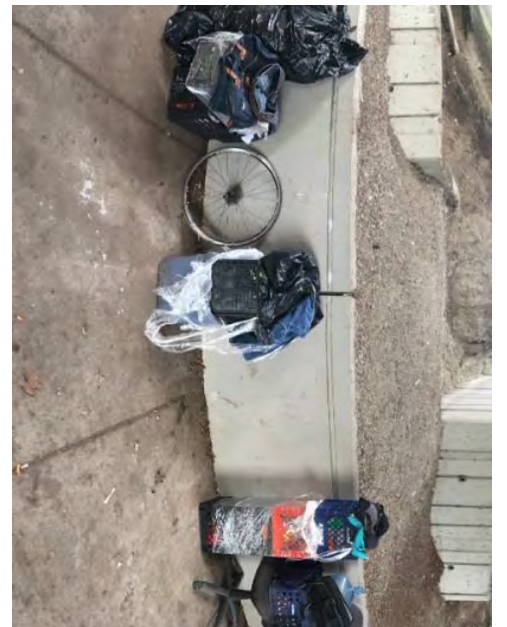
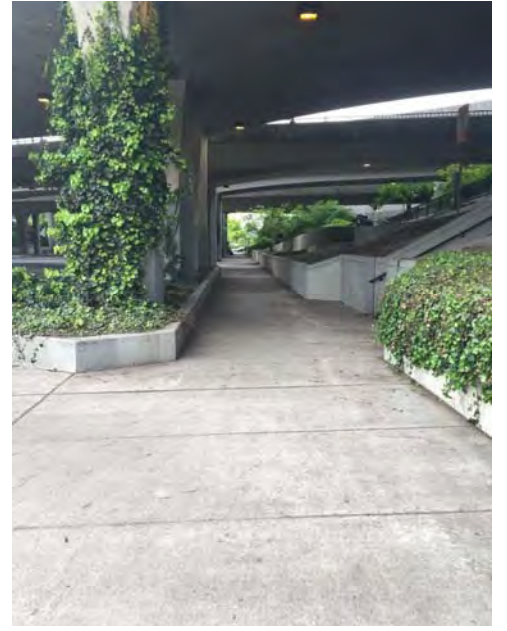




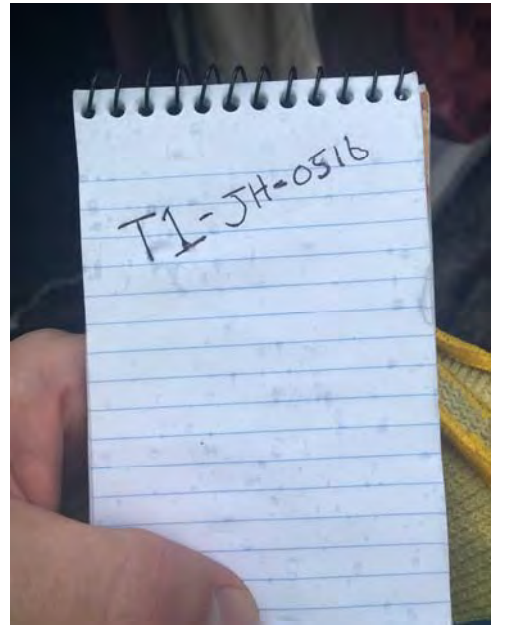


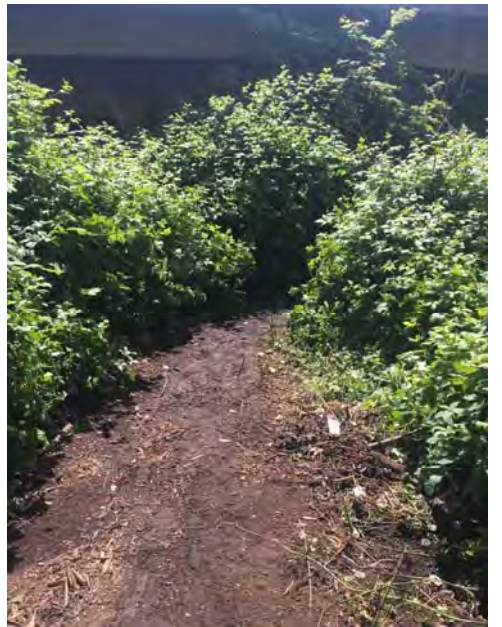
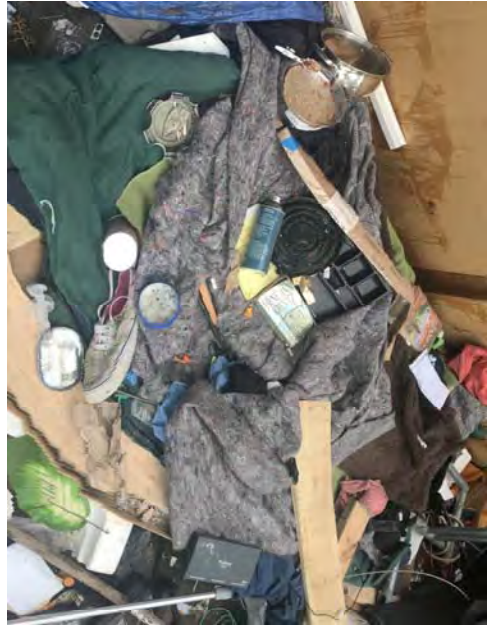
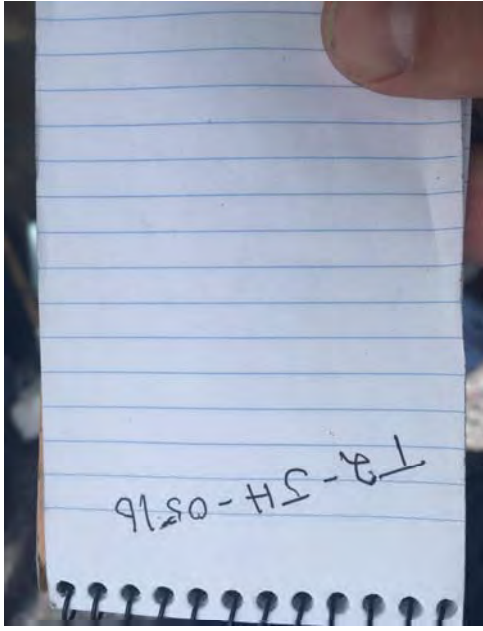


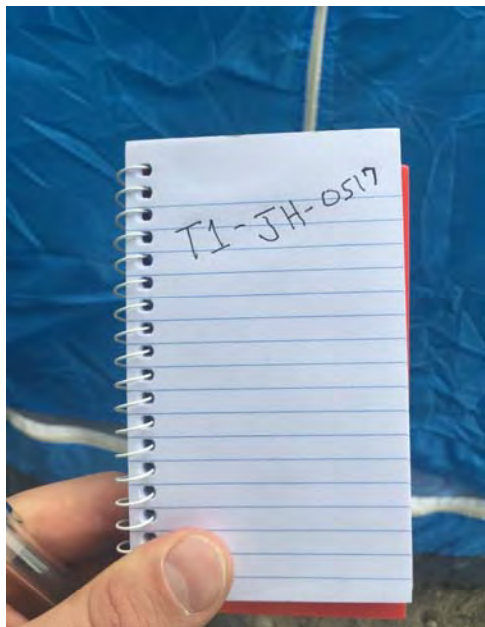
EXHIBIT D - CLEAN UP PHOTOS

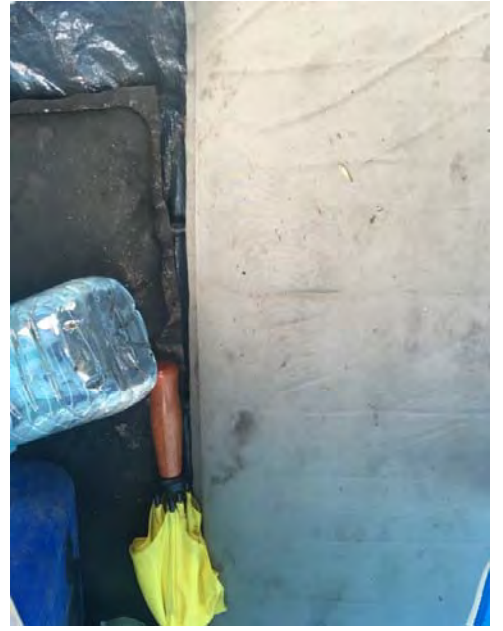


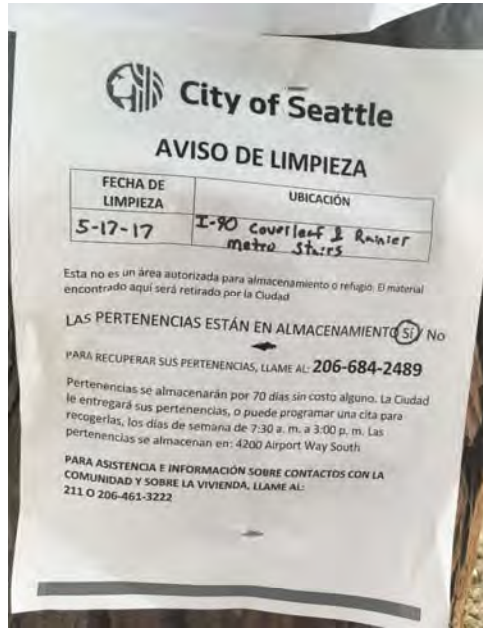
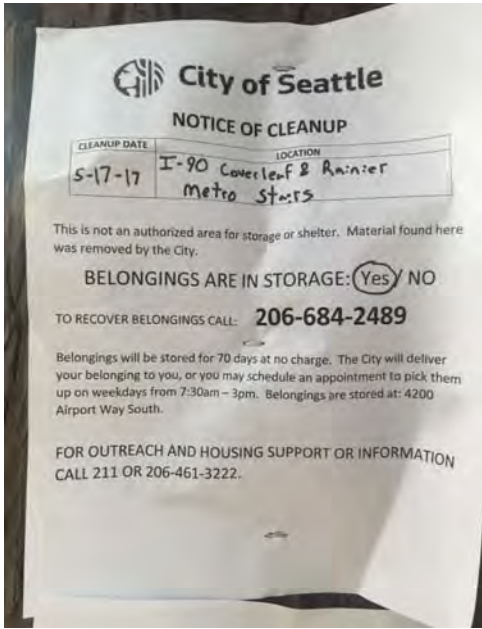




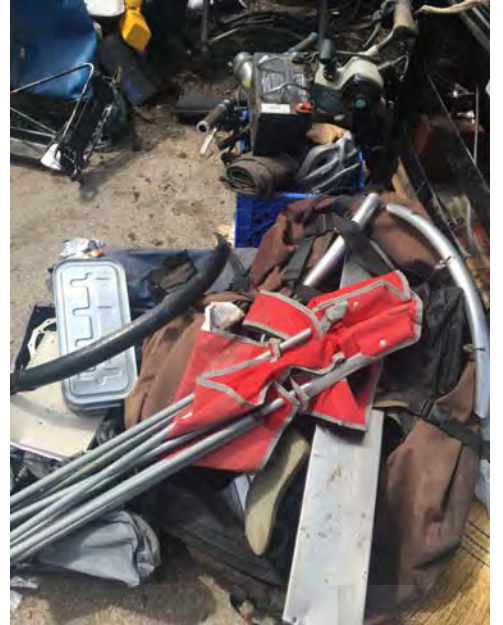


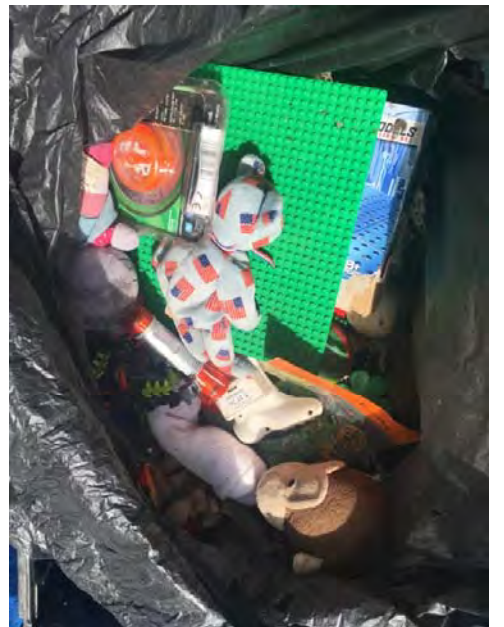


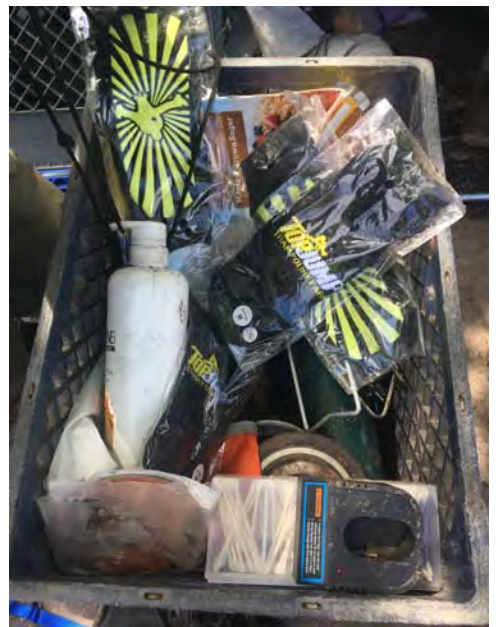






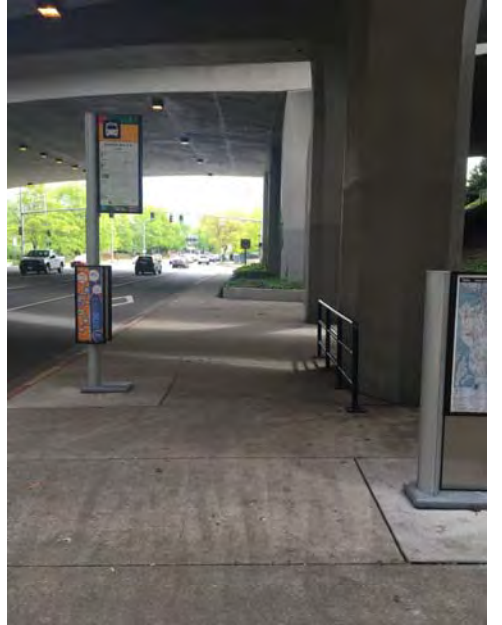
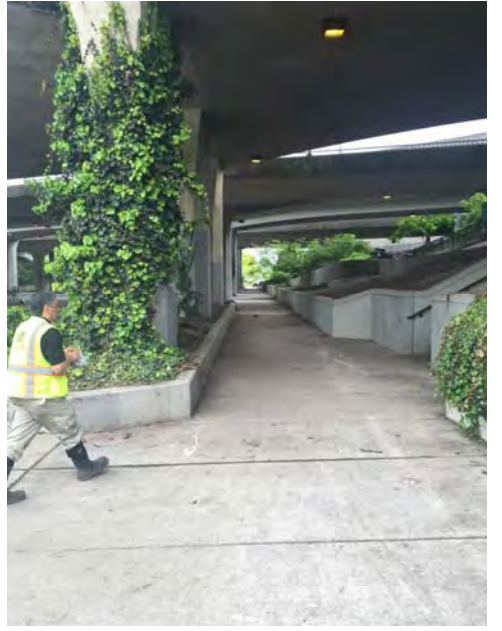


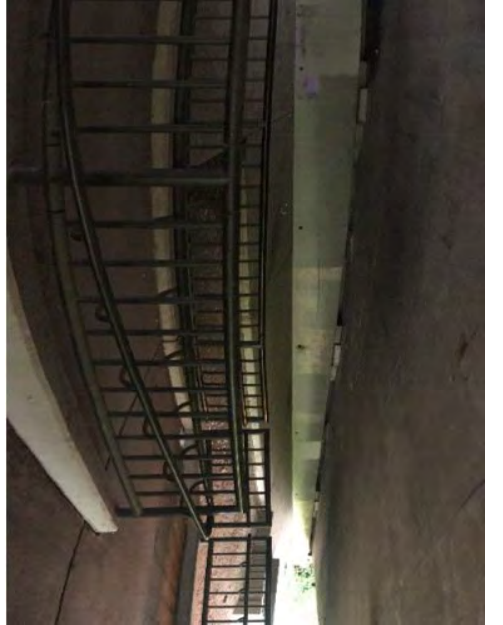




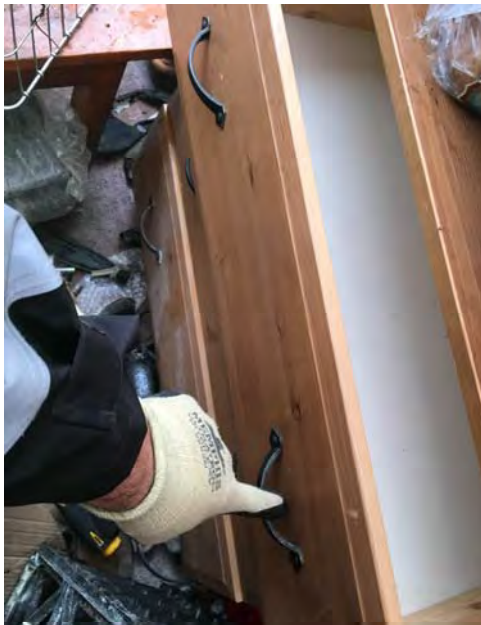


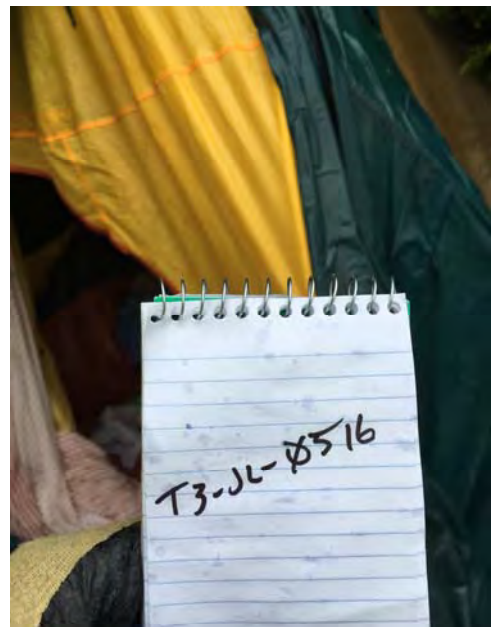




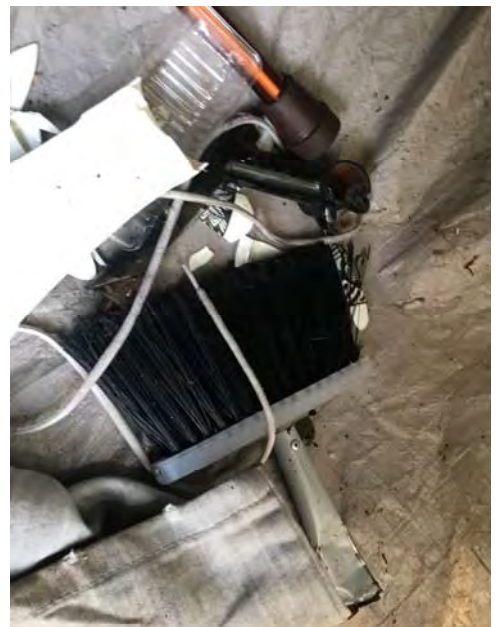
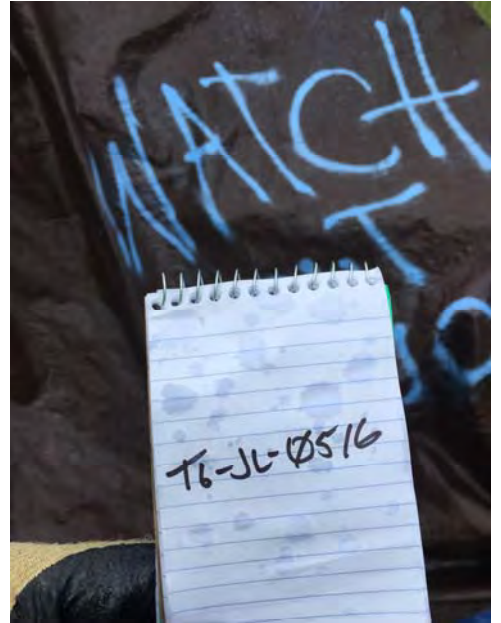
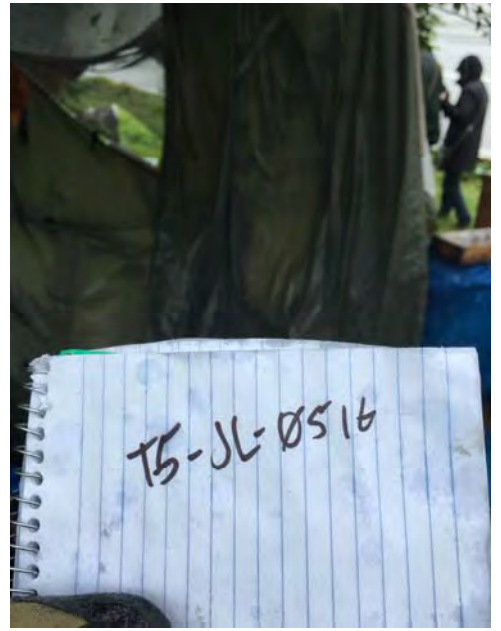


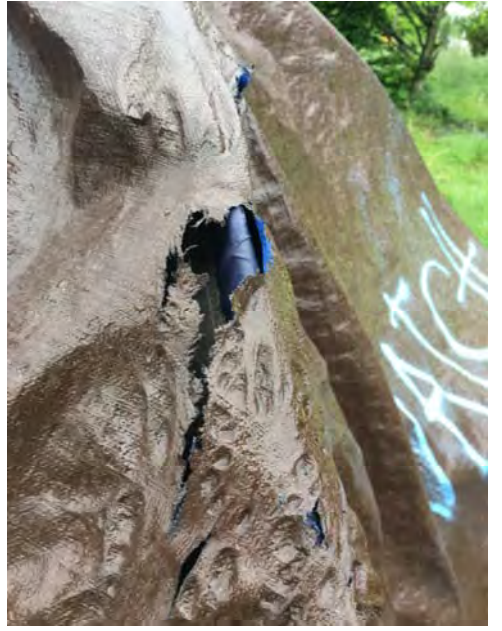




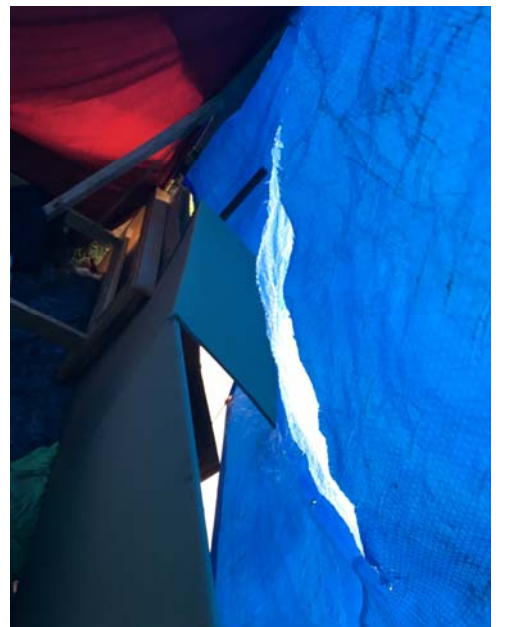
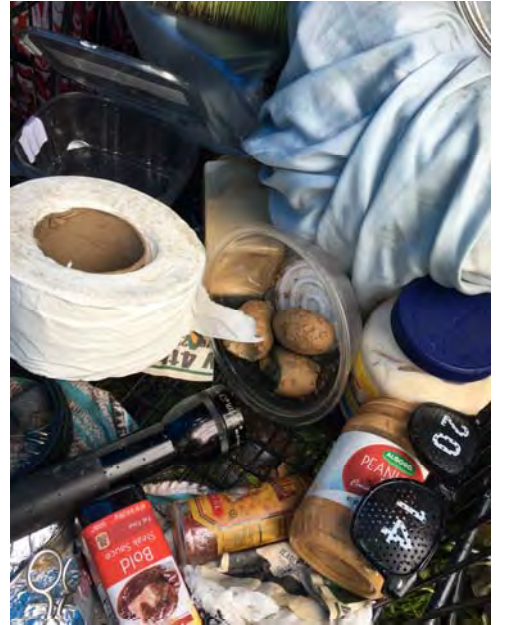
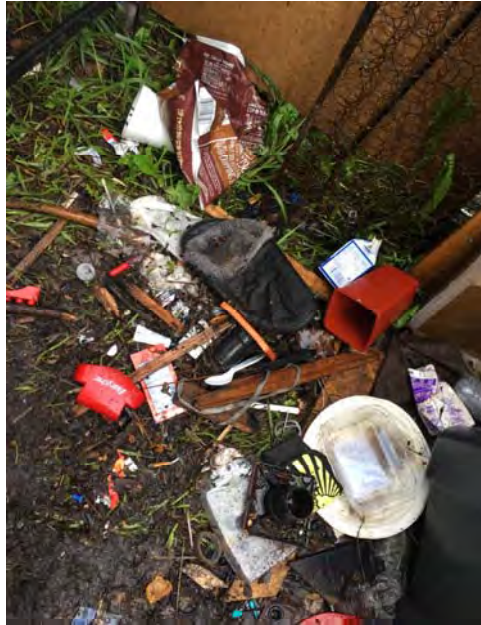


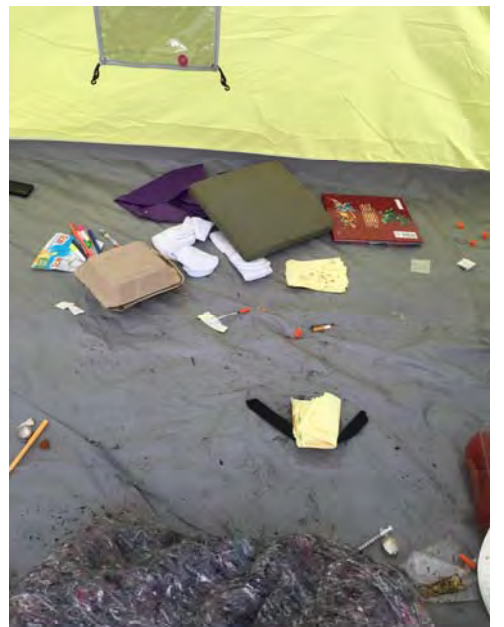
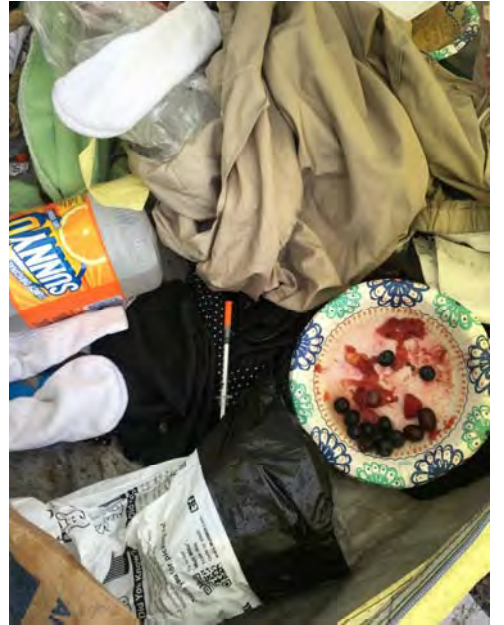
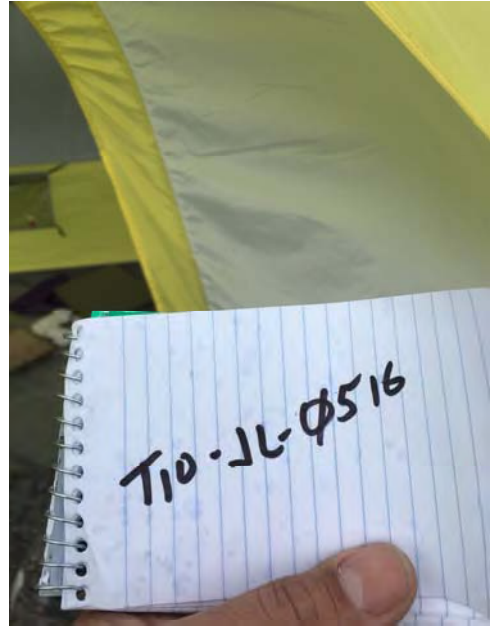


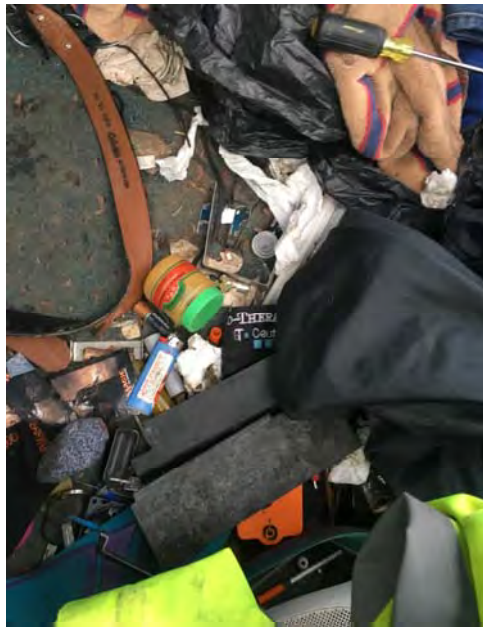
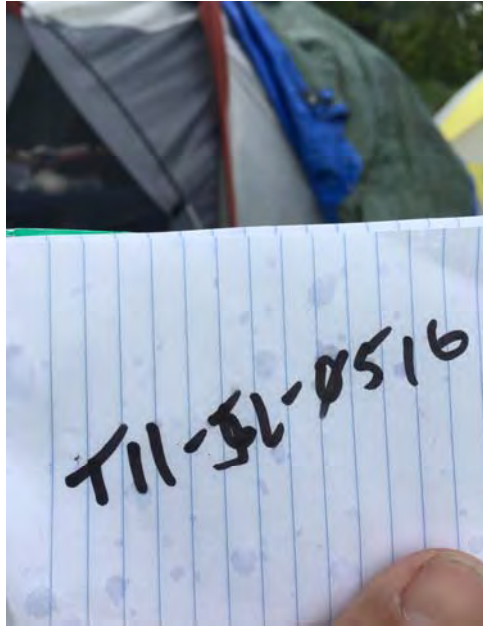


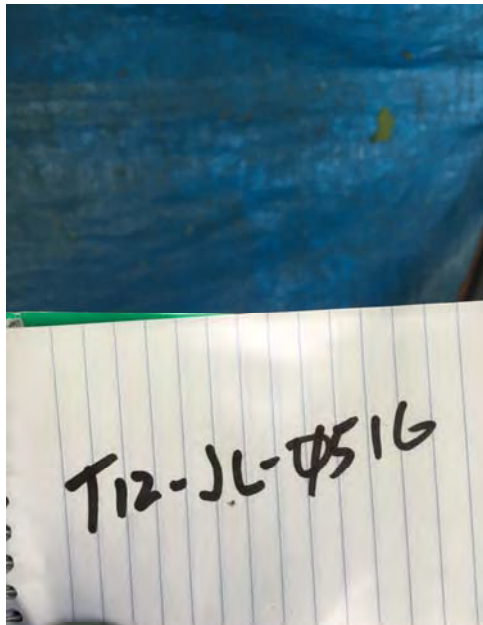
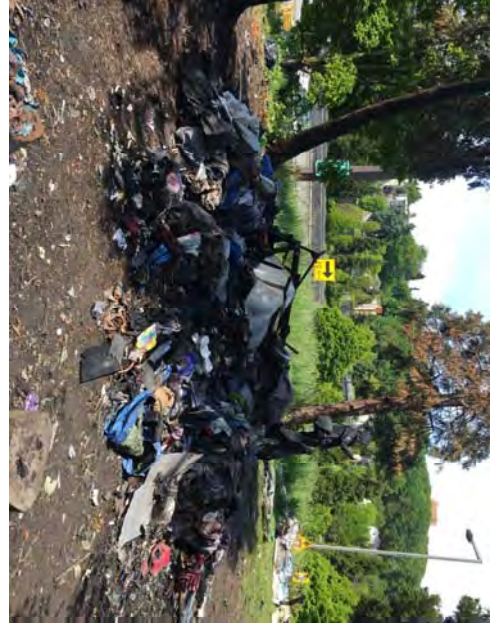


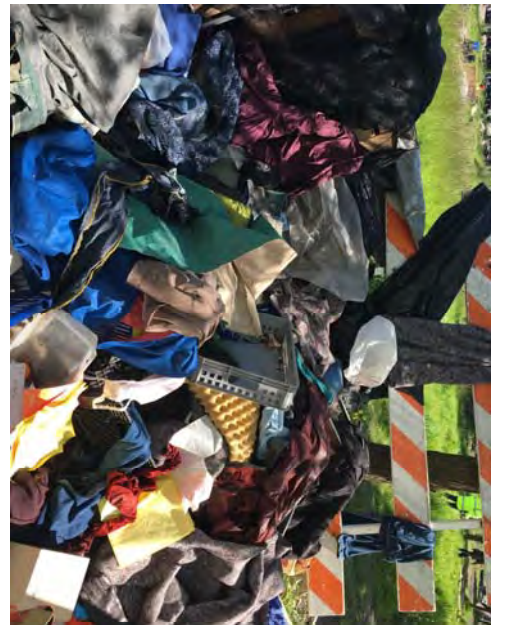
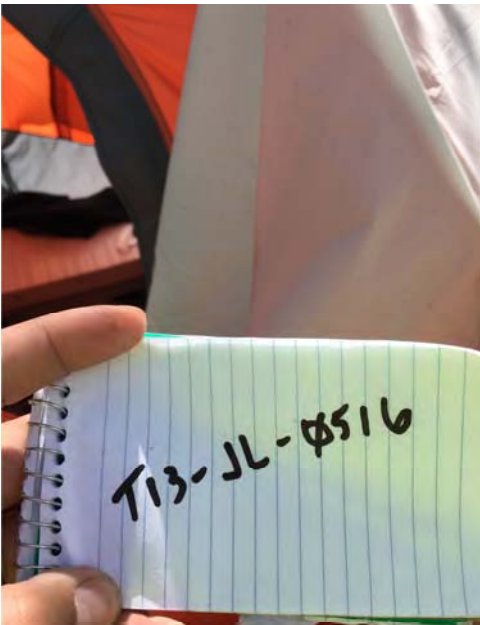


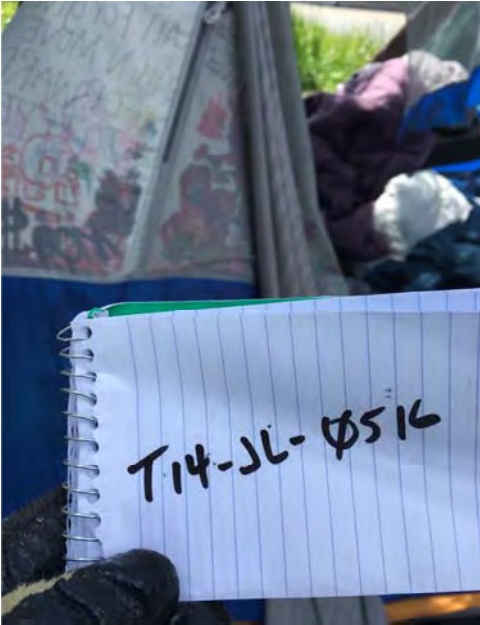
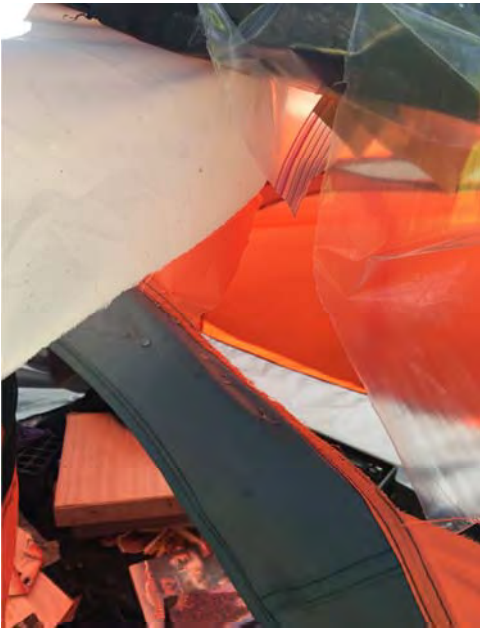


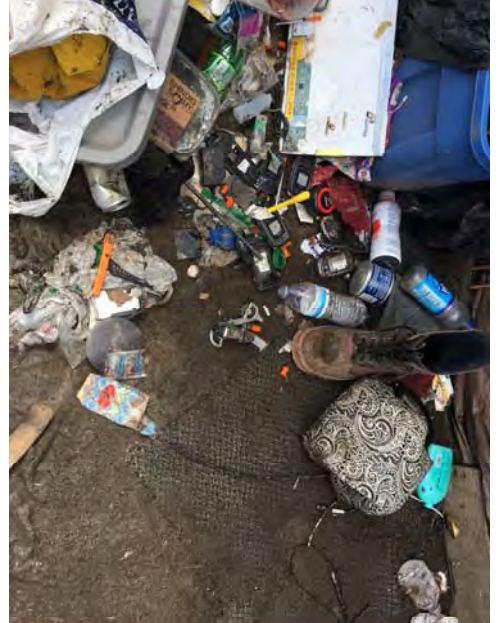


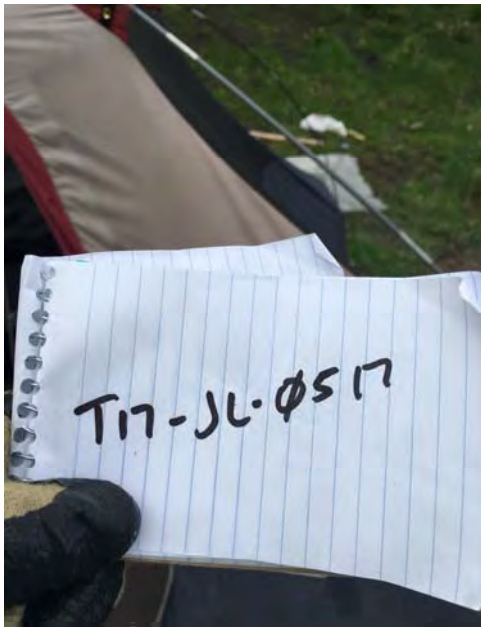
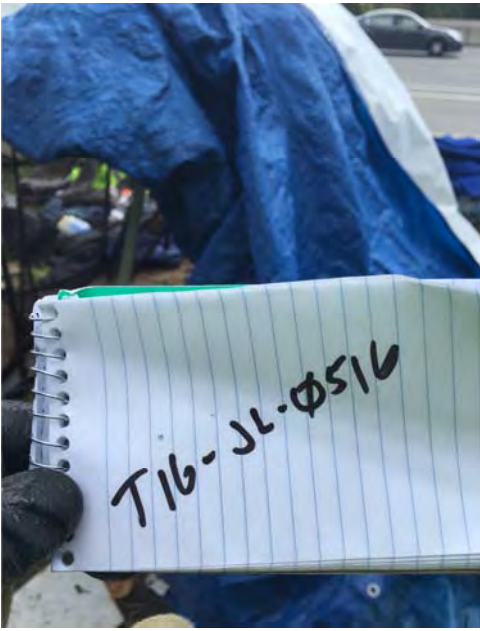


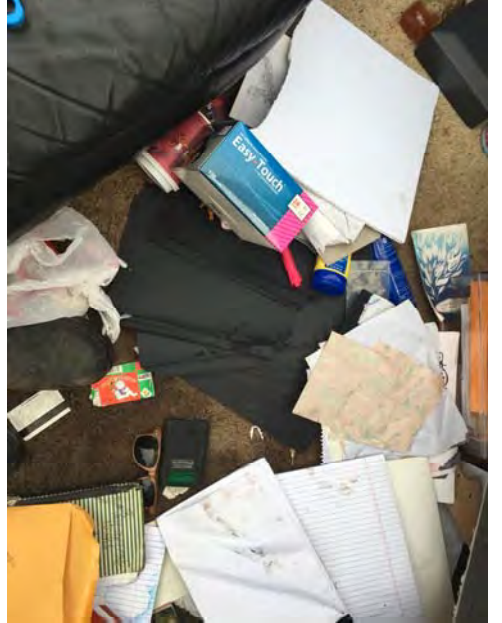
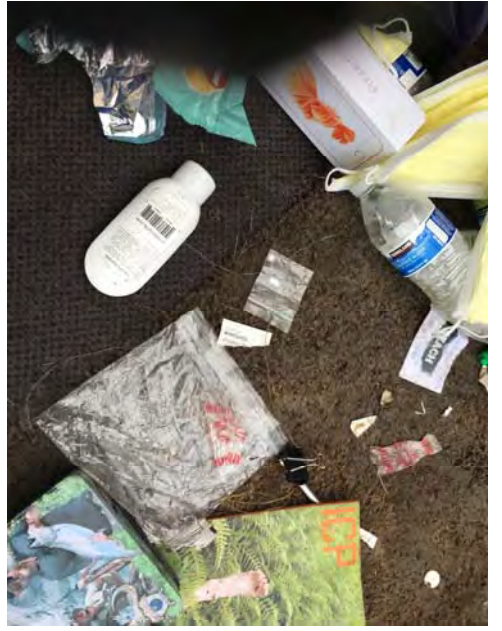


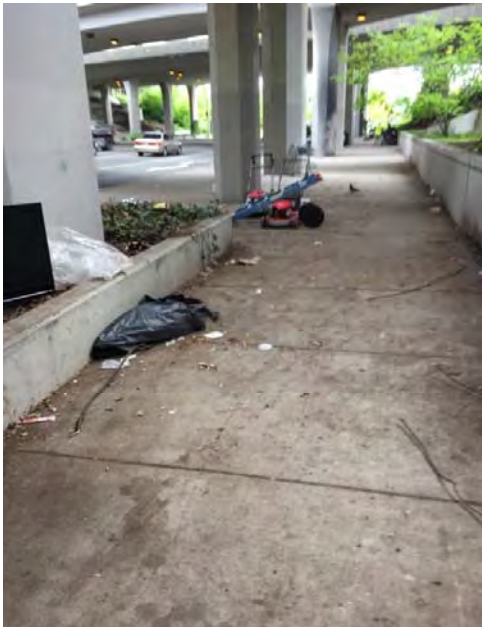


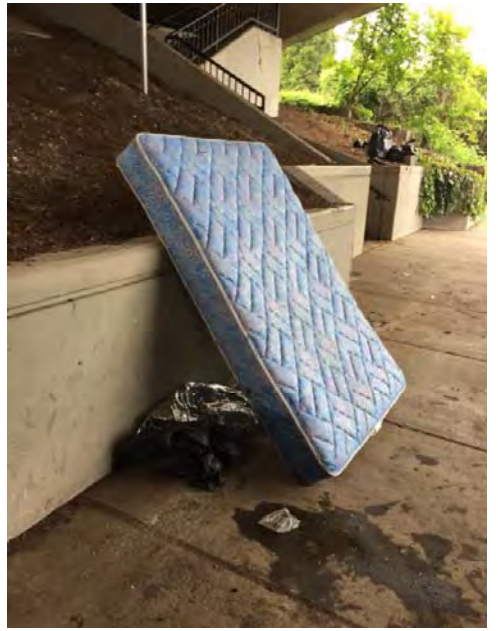


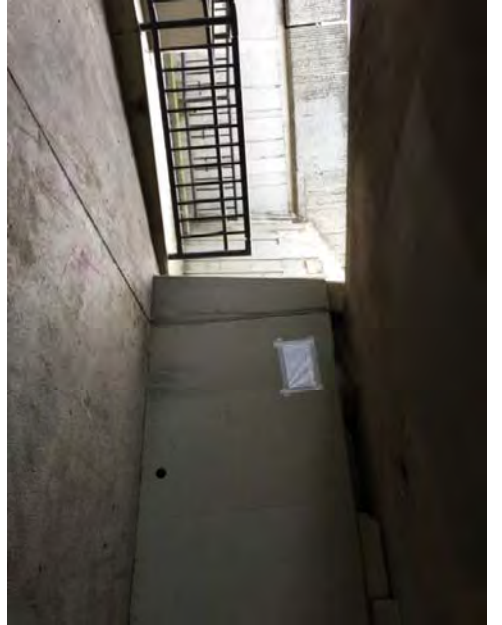


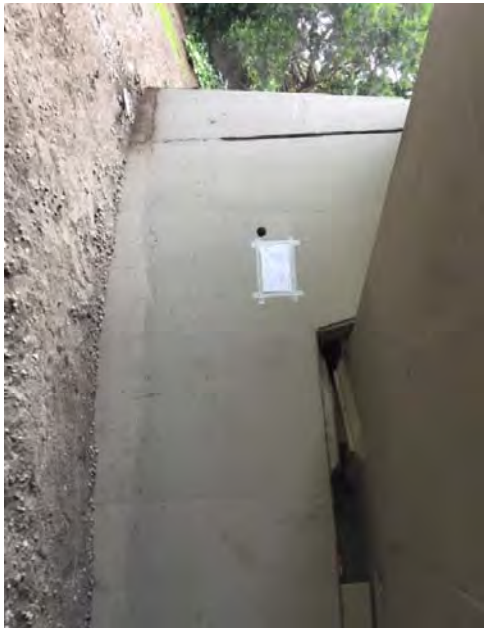


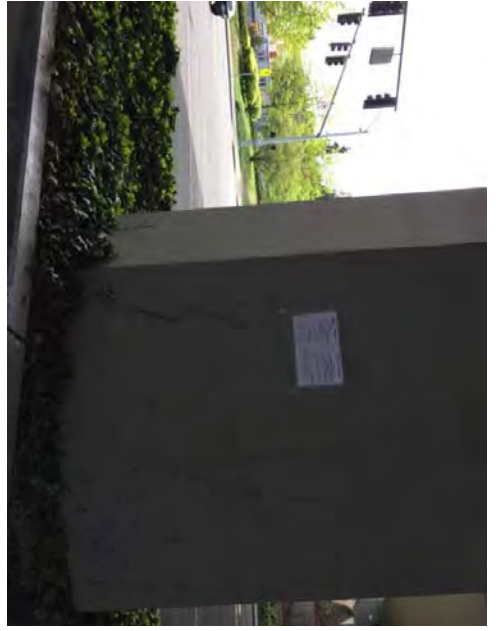


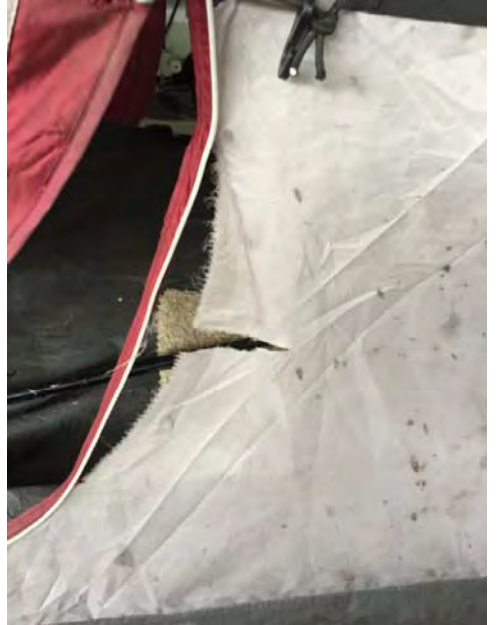
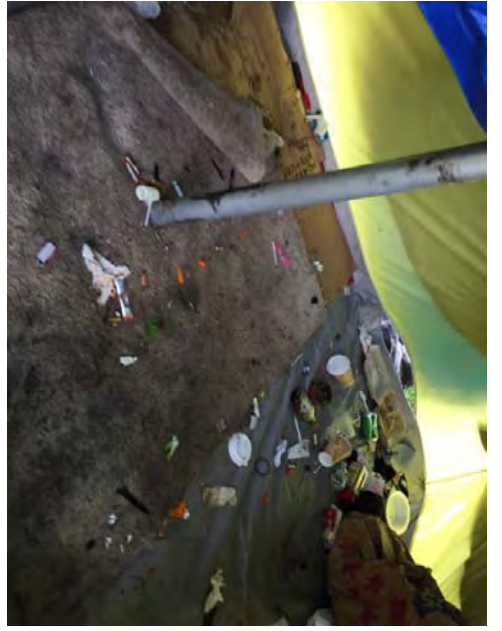


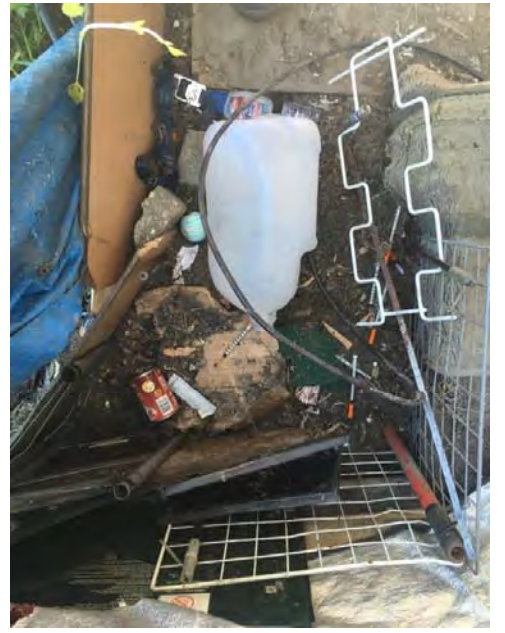


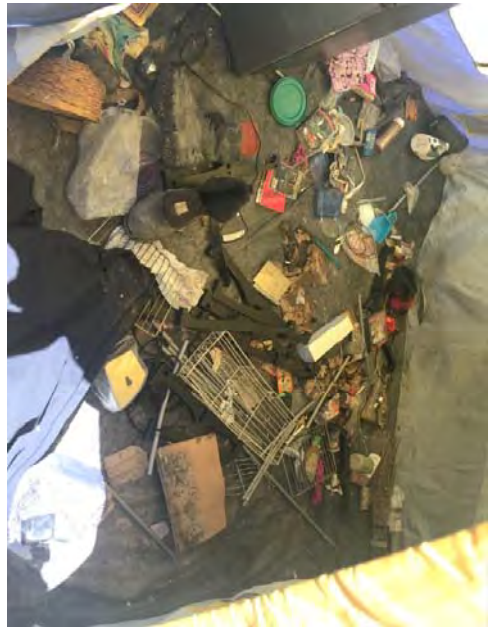
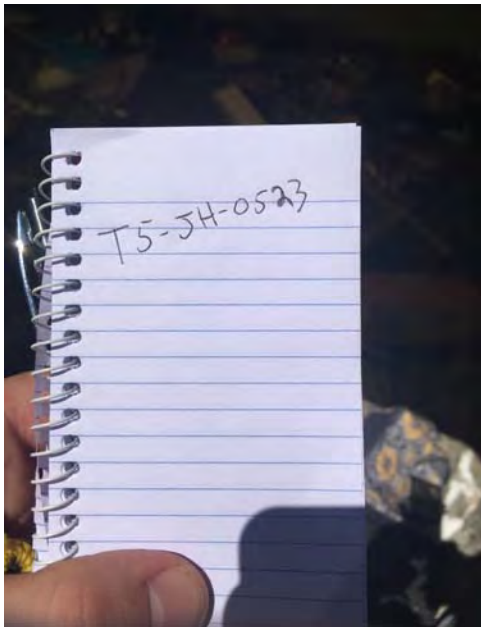
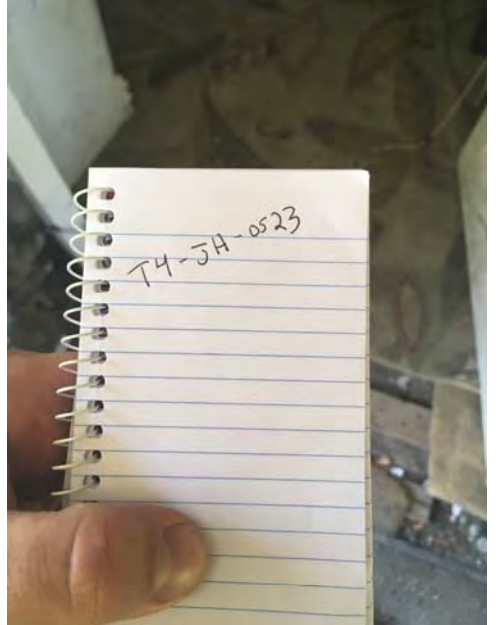


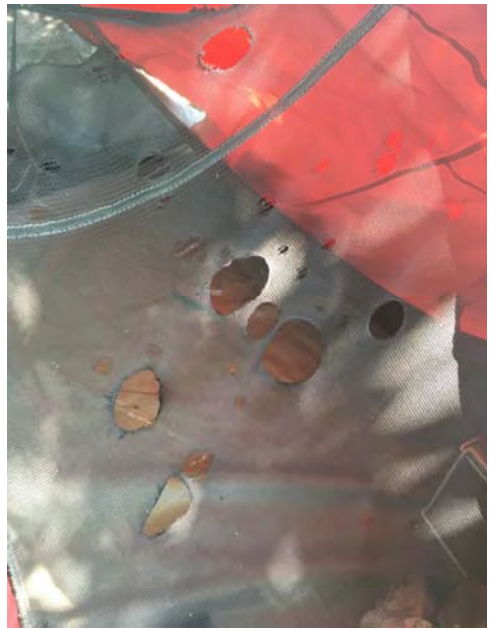
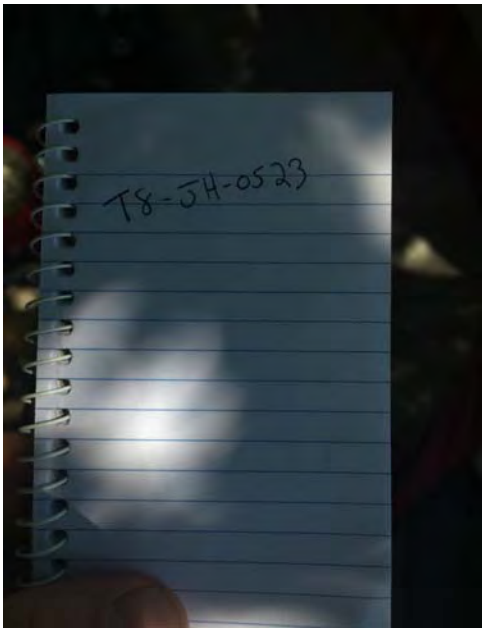
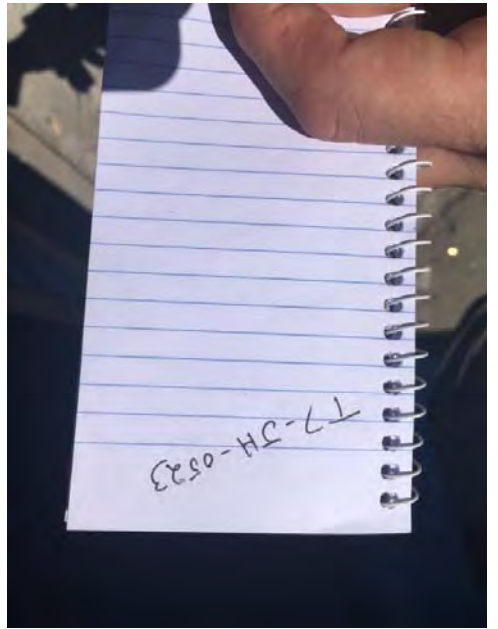
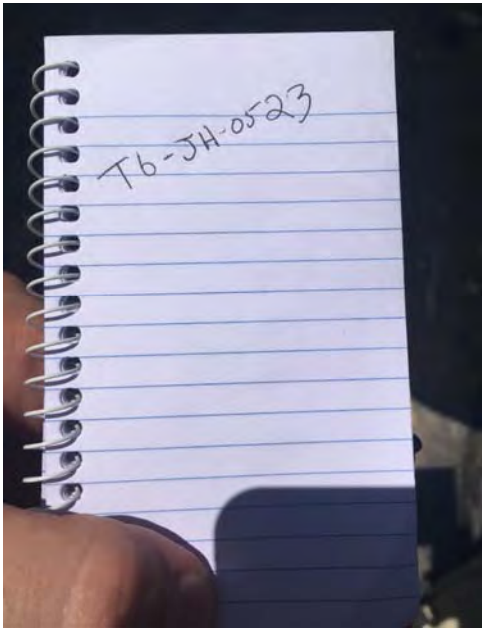


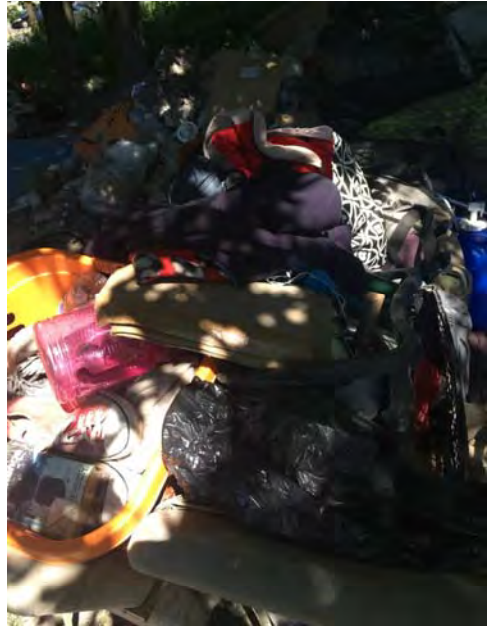


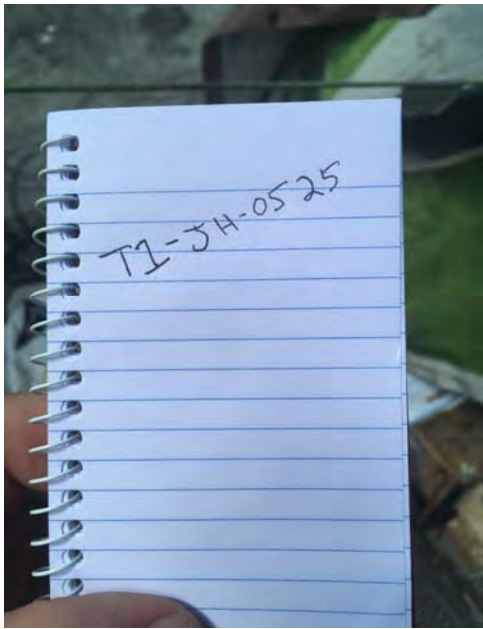


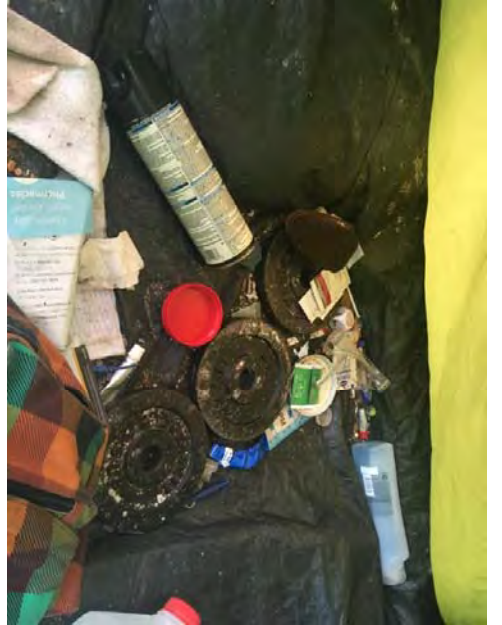
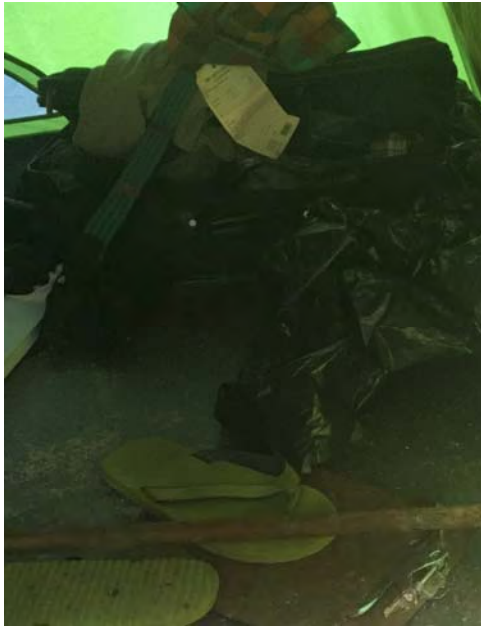








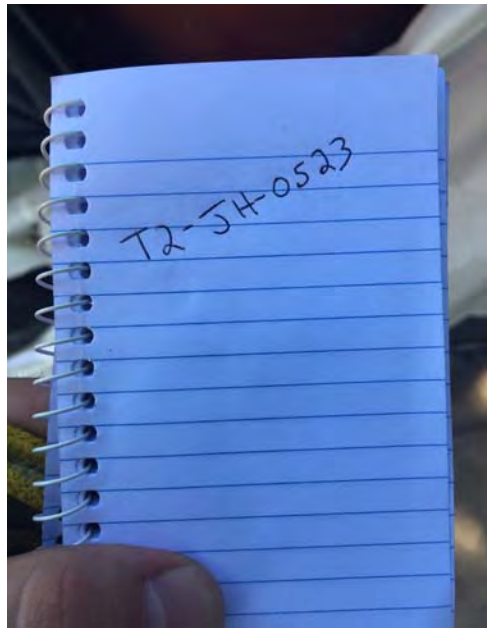
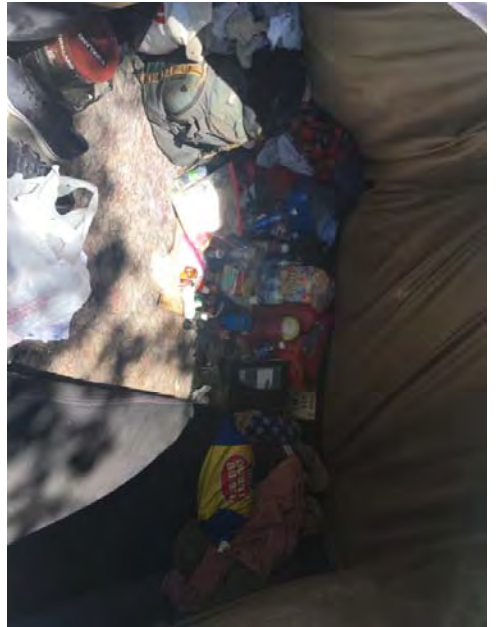
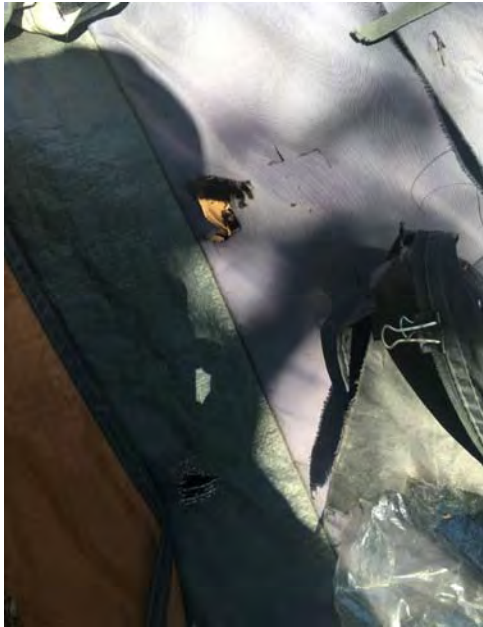
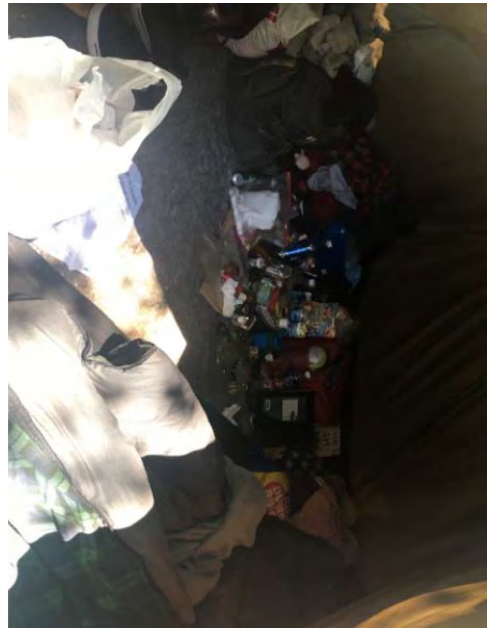
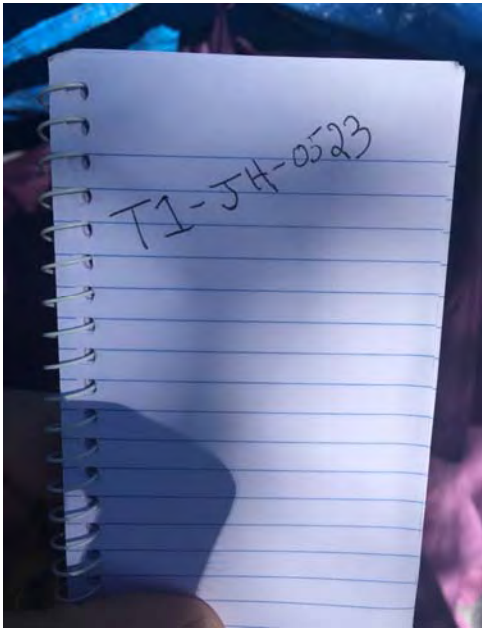


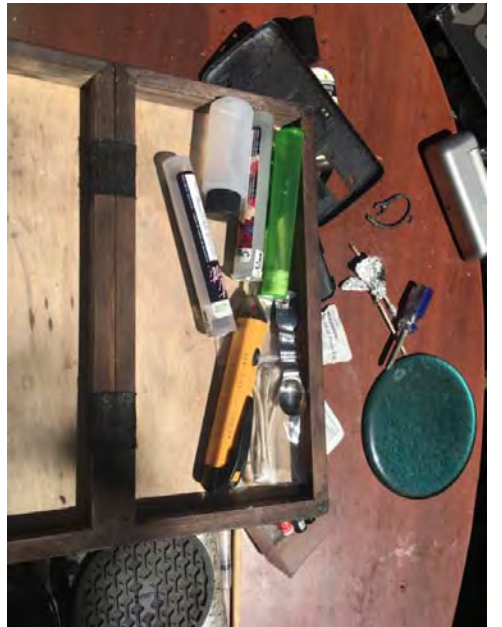
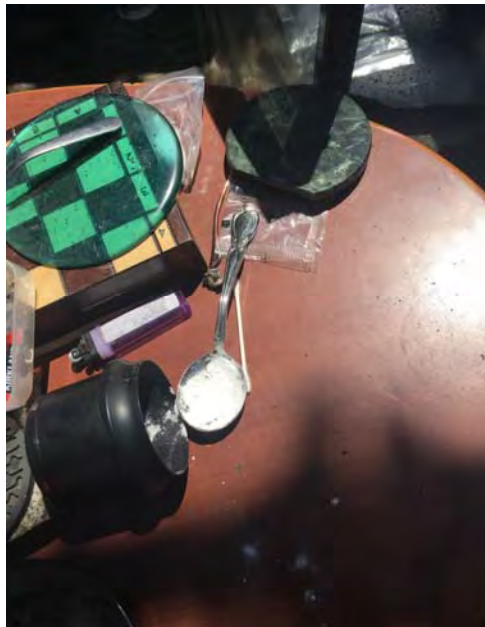
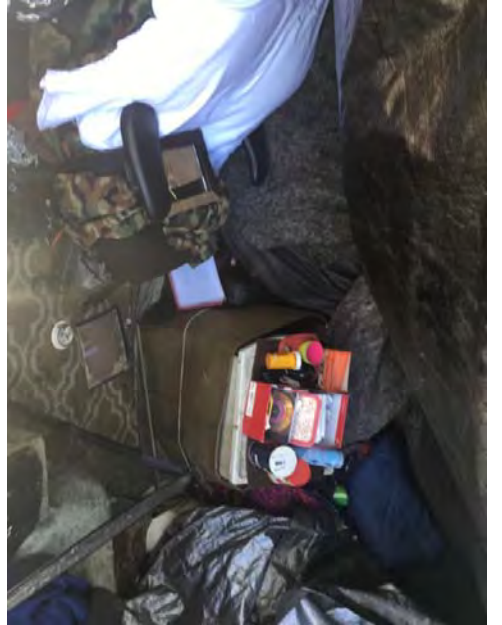
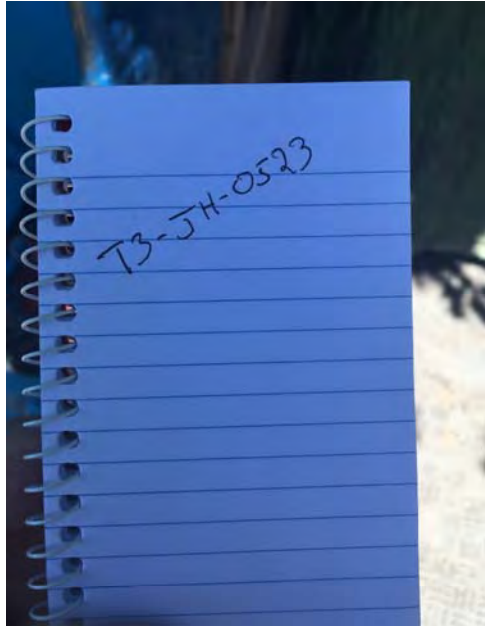


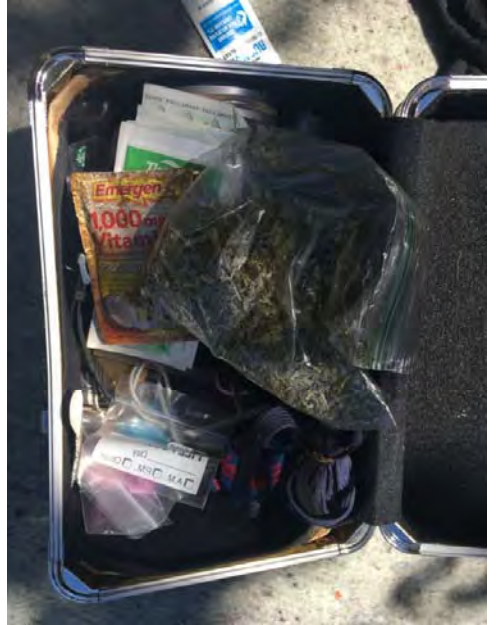




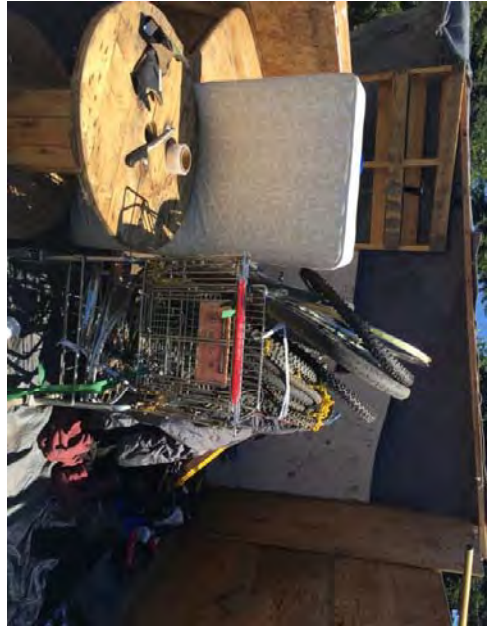








T3-JL-0523



T4-JL-0523

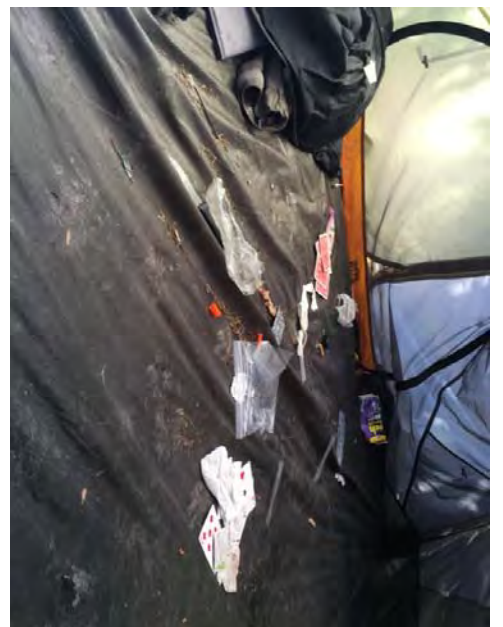
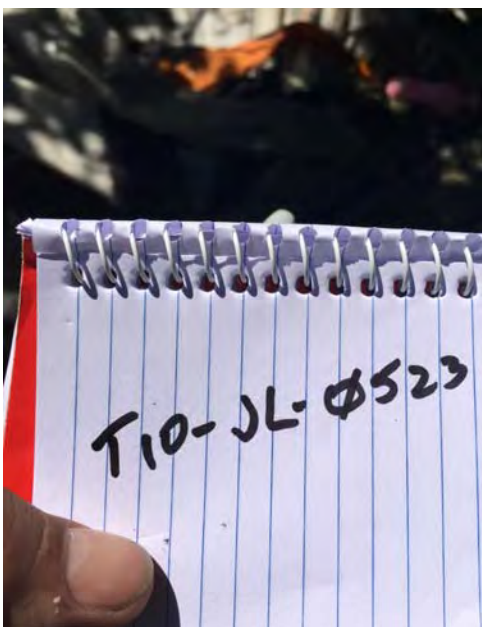
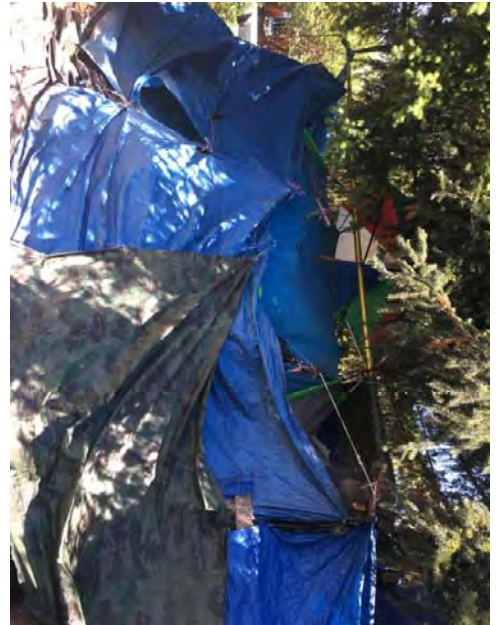
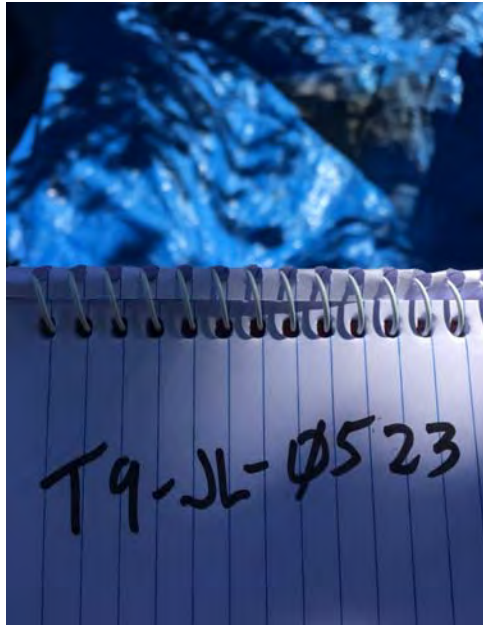
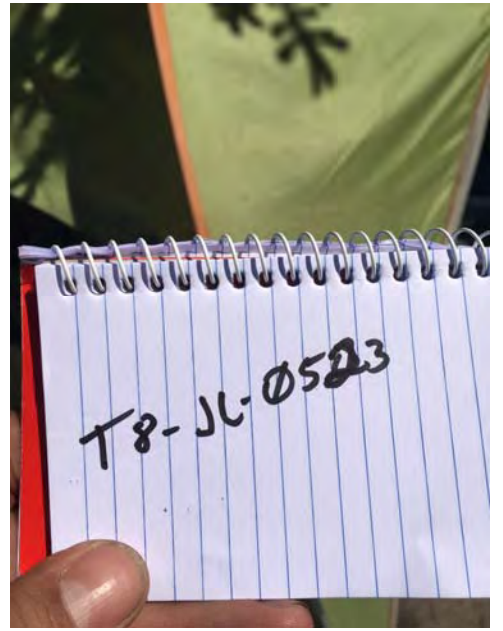
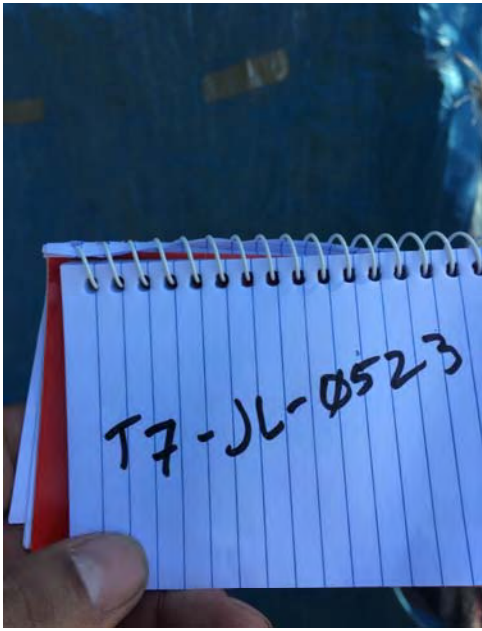


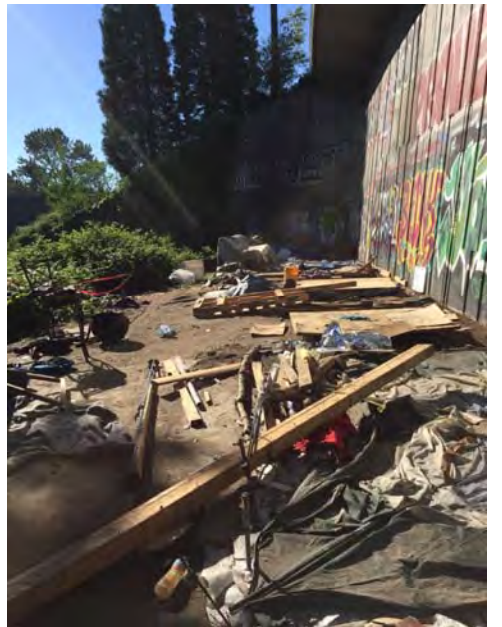
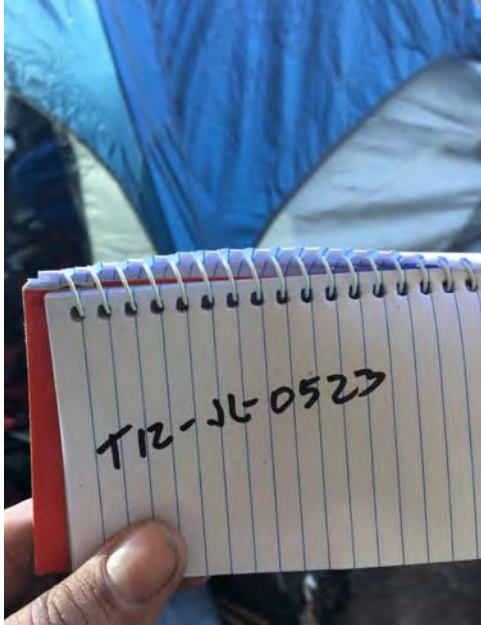
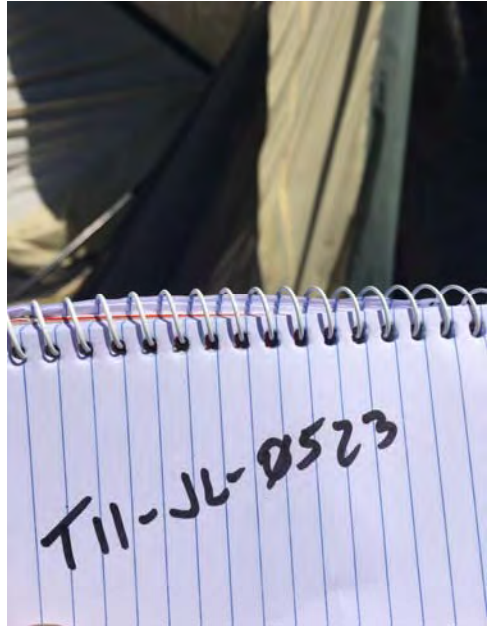
T5-JL-0523

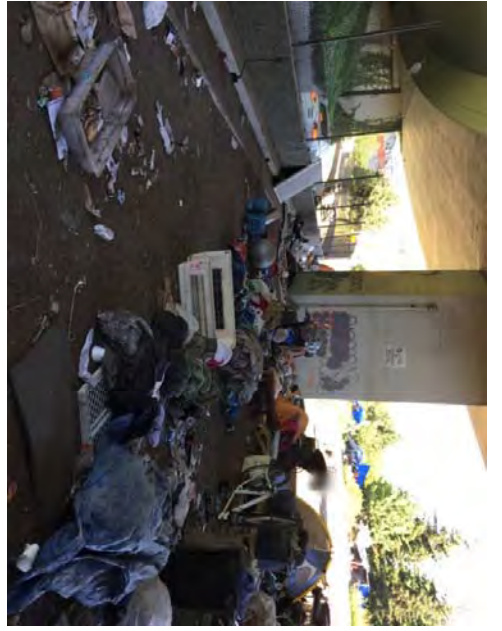
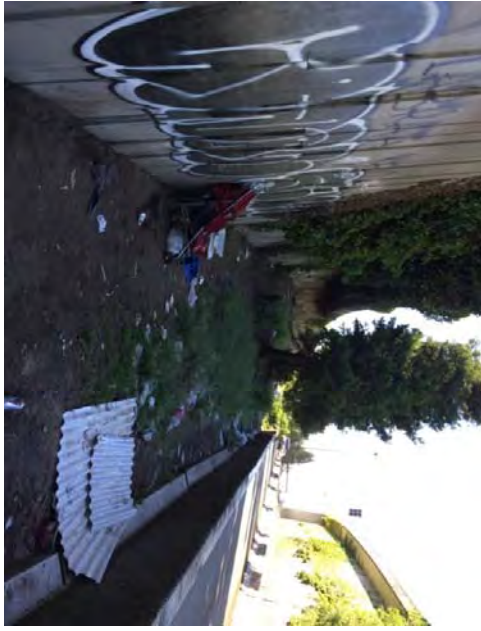


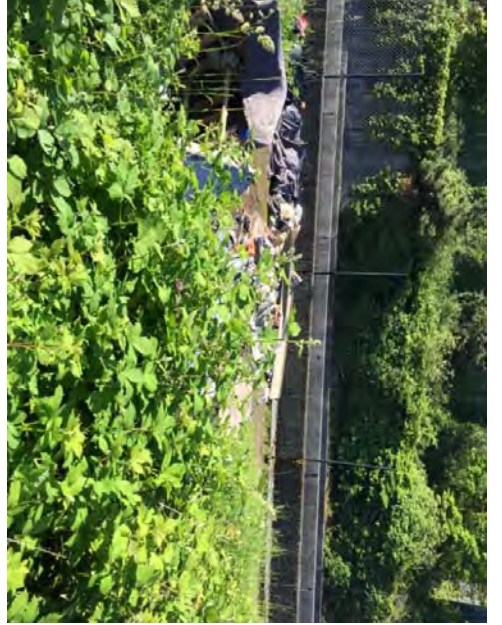
T6-JL-0523

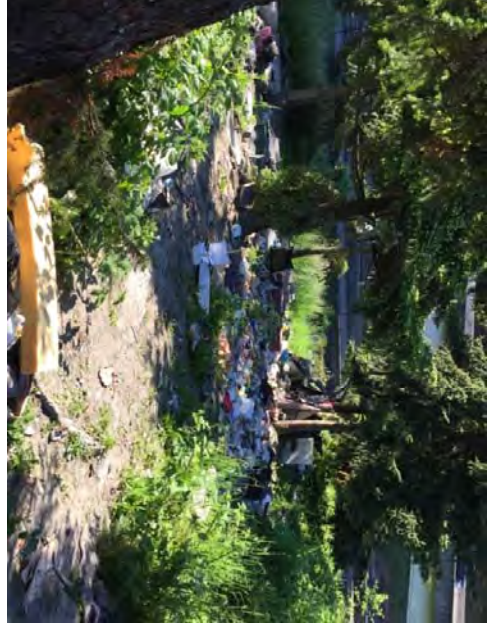
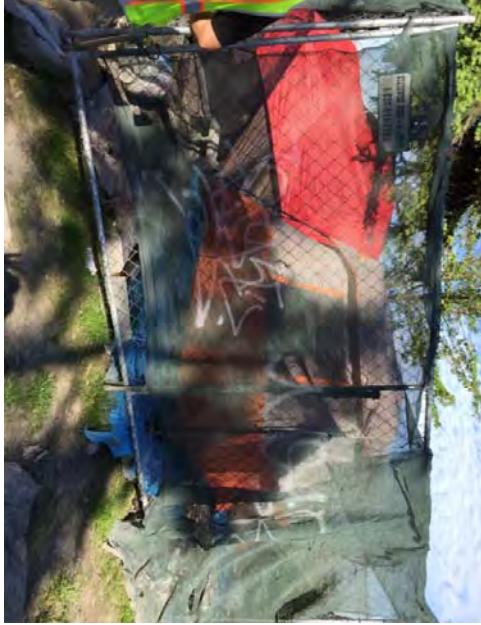
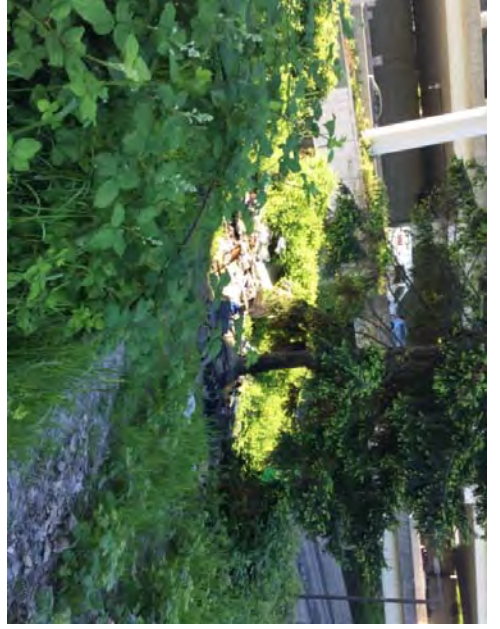




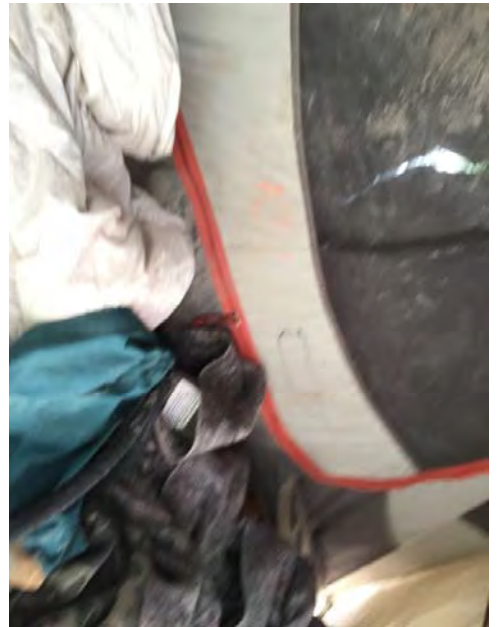
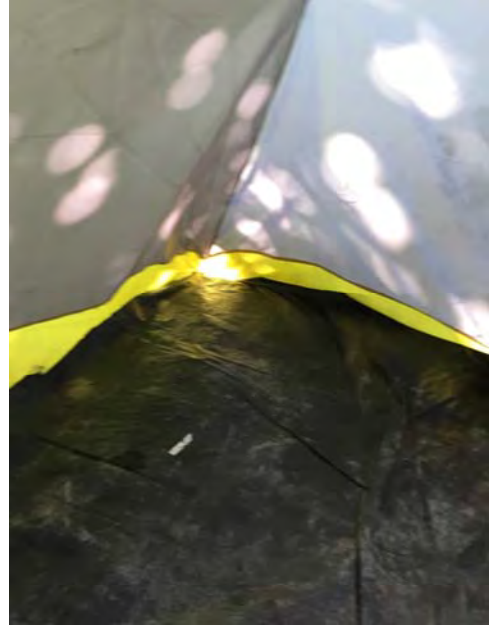
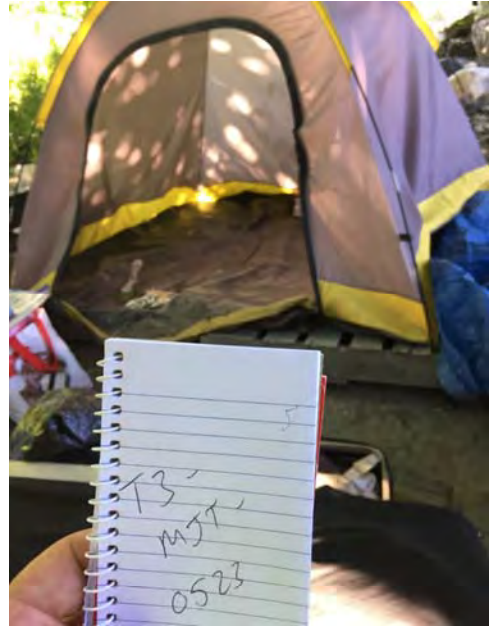


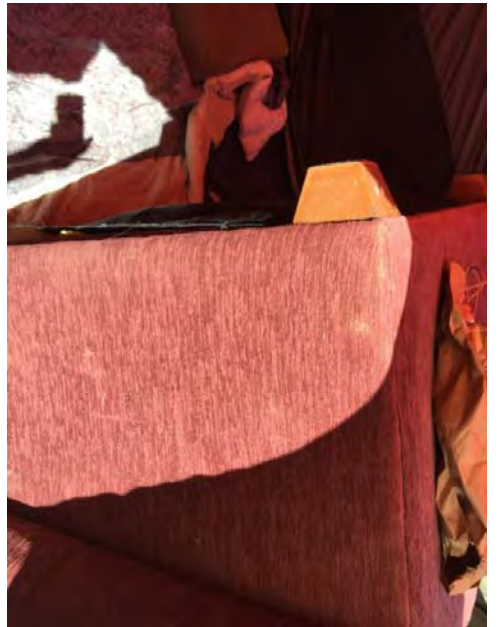




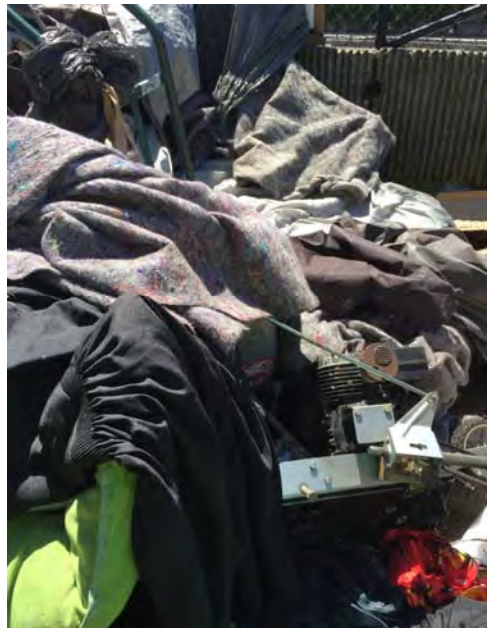
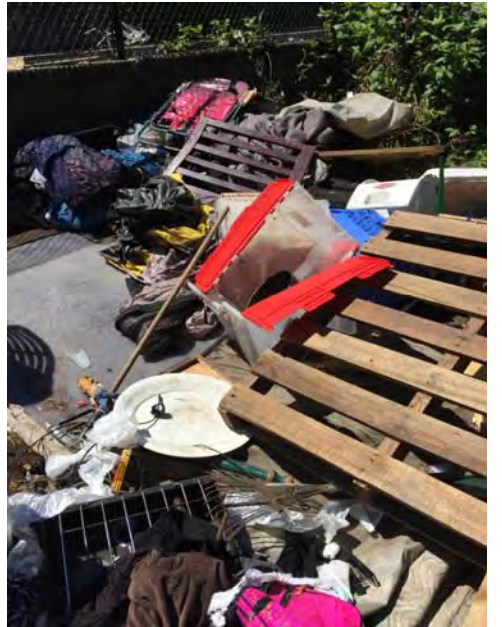
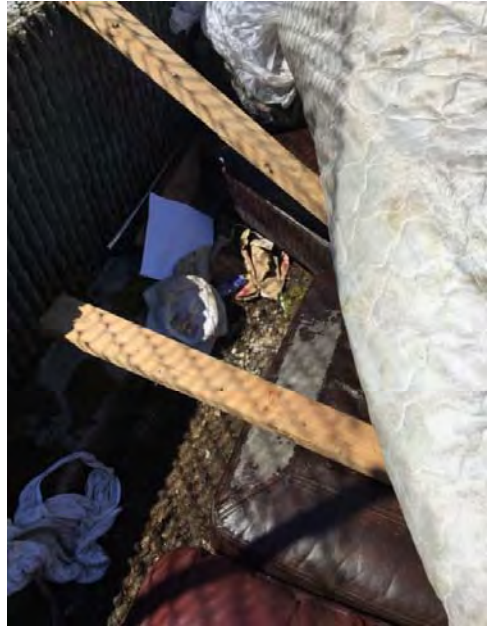


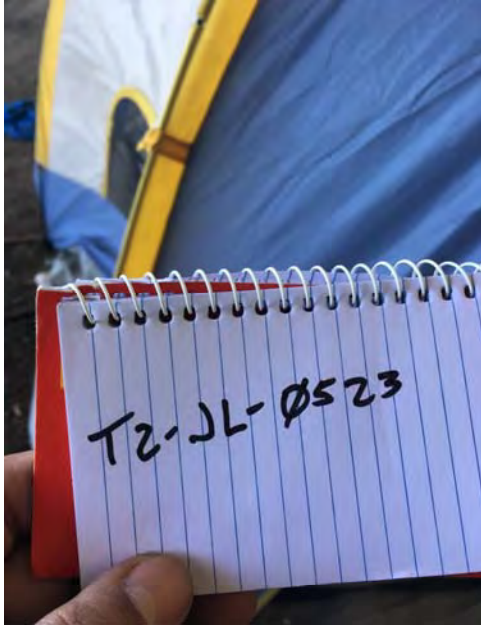
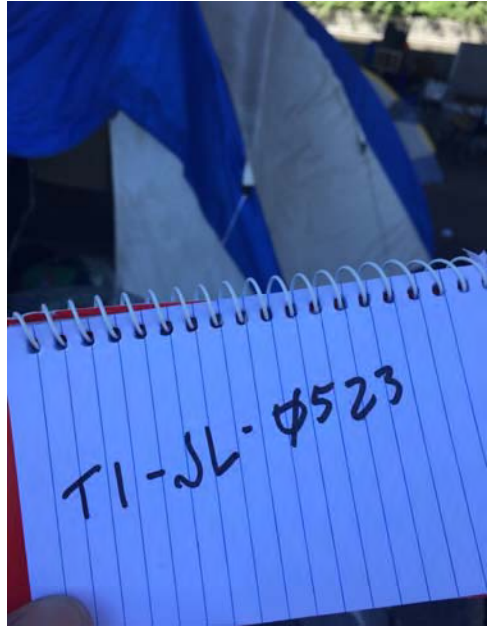












Site Name: I-90 Cloverleaf & Metro Stairs

 Date of Clean Up: 5-16-17 to 5-18-17

 Field Coordinators are responsible for completing this form as part of the **Site Journal**. You should log the following –

- Tent owners who present and accept storage
- Tent owners who are present and indicate that they want their tent/belongings disposed of
- Abandoned tents or items found in debris that we are storing
- Abandoned tents that we are disposing of

Each tent/structure should occupy one line so we can document if storage was offered, accepted or to explain why we disposed or stored items. After this form is complete, you will use the totals from this form to fill out the Storage Summary and Totals information.

Tent Naming Convention: T#-Initials-MonthDay

Example: T1-JH-0428

Owner Name or Tent/Structure #	Owner Present?	Storage?	Not Storable? <i>Check All That Apply</i>	# of Bins	# of Bikes	# of Luggage	# of Large Items	Short Description
T1-JH-0516	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Accepted <input checked="" type="checkbox"/> Declined <input type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged	0	0	0	0	Owner [redacted] took what she wanted and stated to throw the rest away
T2-JH-0516	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input checked="" type="checkbox"/> Hazardous Material <input checked="" type="checkbox"/> Human Waste <input checked="" type="checkbox"/> Damaged	1	0	0	0	Structure had open urine bottles, feces in cans and garbage. Stored blk rubber boots & 3 hard cover books
T1-JH-0517	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input checked="" type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged	2	0	0	0	Stored- tent, red suitcase, sleeping bag, blu&blk backpack and bag of clothes Not stored- 2 soiled sleeping pads, bag & cooler with food
T1-ADD-0516	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input checked="" type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input checked="" type="checkbox"/> Damaged	0	0	0	0	Nothing storable, syringes inside tent, tent ripped
T2-JL-0516	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input checked="" type="checkbox"/> Damaged	0	0	0	0	Nothing storable, tent ripped all items wet
T3-JL-0516	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input checked="" type="checkbox"/> Hazardous Material <input checked="" type="checkbox"/> Human Waste <input checked="" type="checkbox"/> Damaged	0	0	0	0	Feces present, tent ripped

Owner Name <i>or</i> Tent/Structure #	Owner Present?	Storage?	Not Storable? <i>Check All That Apply</i>	# of Bins	# of Bikes	# of Luggage	# of Large Items	Short Description
T4-JL-0517	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input checked="" type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input checked="" type="checkbox"/> Damaged	1	0	0	0	Blue tent, wet and moldy clothing, smells of urine
T5-JL-0517	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input checked="" type="checkbox"/> Human Waste <input checked="" type="checkbox"/> Damaged	0	0	0	0	Nothing storable, urine bottles
T6-JL-0517	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input checked="" type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input checked="" type="checkbox"/> Damaged	0	0	0	0	Tent ripped, wet items, syringes
T7-JL-0517	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input checked="" type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input checked="" type="checkbox"/> Damaged	0	0	0	0	Syringes present, tent ripped, items inside burnt
T8-JL-0517	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input checked="" type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input checked="" type="checkbox"/> Damaged	0	0	0	0	Tent ripped, food items, syringes
T9-JL-0517	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input checked="" type="checkbox"/> Damaged	0	0	0	0	All items wet, food items, moldy mattress
T10-JL-0517	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input checked="" type="checkbox"/> Hazardous Material <input checked="" type="checkbox"/> Human Waste <input checked="" type="checkbox"/> Damaged	0	0	0	0	Syringes, wet items, urine bottles
T11-JL-0517	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input checked="" type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input checked="" type="checkbox"/> Damaged	0	0	0	0	Wet clothing, syringes
T12-JL-0517	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input checked="" type="checkbox"/> Hazardous Material <input checked="" type="checkbox"/> Human Waste <input checked="" type="checkbox"/> Damaged	0	0	0	0	Bags of urine. Ripped tent, syringes

Owner Name <i>or</i> Tent/Structure #	Owner Present?	Storage?	Not Storable? <i>Check All That Apply</i>	# of Bins	# of Bikes	# of Luggage	# of Large Items	Short Description
T13-JL-0517	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input checked="" type="checkbox"/> Damaged	0	0	0	0	Tent ripped, wet clothes
T14-JL-0517	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input checked="" type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input checked="" type="checkbox"/> Damaged	0	0	0	0	Syringes, food items
T15-JL-0517	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input checked="" type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input checked="" type="checkbox"/> Damaged	0	0	0	0	Syringes, wet and moldy items
T16-JL-0517	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input checked="" type="checkbox"/> Damaged	0	0	0	0	Wet and moldy items
T17-JL-0517	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input checked="" type="checkbox"/> Damaged	0	0	0	0	Wet rug and clothing
T18-JL-0517	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Accepted <input checked="" type="checkbox"/> Declined <input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input checked="" type="checkbox"/> Damaged	0	0	0	0	Owner stated anything left behind was garbage
Debris Field	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged	0	2	0	0	Red Micargi & blk diamondback bikes
██████████	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Declined <input type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged	2	1	0	0	Brown tent bag, camo roller bag, red next bike
██████████	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Declined <input type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged	1	2	0	0	Blue back pack, blue great bike,,red raleigh

Owner Name <i>or</i> Tent/Structure #	Owner Present?	Storage?	Not Storable? <i>Check All That Apply</i>	# of Bins	# of Bikes	# of Luggage	# of Large Items	Short Description
██████████	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Declined <input type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged	1	0	0	0	Green laundry basket, shoes
██████████	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Declined <input type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged	7	0	0	2	Bkl suit case, big ternt poles, wheel barrow w/garden tools
██████████	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Declined <input type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged	8	0	0	2	Self stored blankets, tarps toys 1 wheel chair 1 large flat screen tv
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged					
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged					
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged					
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged					
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged					

Site Name: I-90 corridor Poplar & Dean

 Date of Clean Up: 05-23-17

 Field Coordinators are responsible for completing this form as part of the *Site Journal*. You should log the following –

- Tent owners who present and accept storage
- Tent owners who are present and indicate that they want their tent/belongings disposed of
- Abandoned tents or items found in debris that we are storing
- Abandoned tents that we are disposing of

Each tent/structure should occupy one line so we can document if storage was offered, accepted or to explain why we disposed or stored items. After this form is complete, you will use the totals from this form to fill out the Storage Summary and Totals information.

Tent Naming Convention: T#-Initials-MonthDay

Example: T1-JH-0428

Owner Name or Tent/Structure #	Owner Present?	Storage?	Not Storable? <i>Check All That Apply</i>	# of Bins	# of Bikes	# of Luggage	# of Large Items	Short Description
[REDACTED]	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged	4	0	0	0	Red purse, blk and red backpack, red backpack, blk bag w/clothes, red tent bag, blue backpack, blk bag w/blue tent, personal items
[REDACTED]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Declined <input type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged	1	0	0	0	Clothes, books, yellow jacket
[REDACTED]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Declined <input type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged	1	0	0	1	Large white coffee table w/glass top, small blk portable burner
T1-JL-0523	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Accepted <input checked="" type="checkbox"/> Declined <input type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged	0	0	0	0	Owner stated anything left behind was garbage
T2-JL-0523	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input checked="" type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input checked="" type="checkbox"/> Damaged	0	0	0	0	Tent ripped, wet and moldy clothing
T3-JL-0523	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Accepted <input checked="" type="checkbox"/> Declined <input type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged	0	0	0	0	Owner stated anything left behind was garbage

Owner Name <i>or</i> Tent/Structure #	Owner Present?	Storage?	Not Storable? <i>Check All That Apply</i>	# of Bins	# of Bikes	# of Luggage	# of Large Items	Short Description
T4-JL-0523	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Accepted <input checked="" type="checkbox"/> Declined <input type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged	0	0	0	0	Owner stated anything left behind was garbage
T5-JL-0523	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Accepted <input checked="" type="checkbox"/> Declined <input type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged	0	0	0	0	Owner stated anything left behind was garbage
T6-JL-0523	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Accepted <input checked="" type="checkbox"/> Declined <input type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged	0	0	0	0	Owner stated anything left behind was garbage
T7-JL-0523	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Accepted <input checked="" type="checkbox"/> Declined <input type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged	0	0	0	0	Owner stated anything left behind was garbage
T8-JL-0523	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Accepted <input checked="" type="checkbox"/> Declined <input type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged	0	0	0	0	Owner stated anything left behind was garbage
T9-JL-0523	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Accepted <input checked="" type="checkbox"/> Declined <input type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged	0	0	0	0	Owner stated anything left behind was garbage
T10-JL-0523	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input checked="" type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input checked="" type="checkbox"/> Damaged	0	0	0	0	Tent ripped, syringes present
T11-JL-0523	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Accepted <input checked="" type="checkbox"/> Declined <input type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged	0	0	0	0	Owner stated anything left behind was garbage
T12-JL-0523	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Accepted <input checked="" type="checkbox"/> Declined <input type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged	0	0	0	0	Owner stated anything left behind was garbage

Owner Name <i>or</i> Tent/Structure #	Owner Present?	Storage?	Not Storable? <i>Check All That Apply</i>	# of Bins	# of Bikes	# of Luggage	# of Large Items	Short Description
T1-JH-0523	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input checked="" type="checkbox"/> Hazardous Material <input checked="" type="checkbox"/> Human Waste <input checked="" type="checkbox"/> Damaged	1	0	0	0	Tent not stored due to damage, tent had can of feces and urine in it, was able to store books, meds, backpack, notebooks and misc.
T2-JH-0523	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Accepted <input checked="" type="checkbox"/> Declined <input type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged	0	0	0	0	Owner ██████ took what he wanted and stated to throw the rest away
T3-JH-0523	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input checked="" type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input checked="" type="checkbox"/> Damaged	6	0	0	1	Structure had drug paraphernalia, needles and food waste, stored suitcases, scooter, tools, DVD'S, clothes and misc.
T4-JH-0523	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Accepted <input checked="" type="checkbox"/> Declined <input type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged	0	0	0	0	Owner took what he wanted and stated to throw the rest away
T5-JH-0523	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input checked="" type="checkbox"/> Hazardous Material <input checked="" type="checkbox"/> Human Waste <input type="checkbox"/> Damaged	0	0	0	0	Nothing stored due to damage, urine smell and garbage inside
T6-JH-0523	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Accepted <input checked="" type="checkbox"/> Declined <input type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input type="checkbox"/> Damaged	0	0	0	0	Owner ██████ took what he wanted and stated to thrown the rest away
T7-JH-0523	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input checked="" type="checkbox"/> Hazardous Material <input checked="" type="checkbox"/> Human Waste <input checked="" type="checkbox"/> Damaged	0	0	0	0	Nothing stored due to tent damages, garbage inside, urine and feces smell
T8-JH-0523	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input type="checkbox"/> Hazardous Material <input type="checkbox"/> Human Waste <input checked="" type="checkbox"/> Damaged	1	0	0	0	Tent not stored due to damage, stored clothes outside of tent
T1-JH-0525	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Accepted <input type="checkbox"/> Declined <input checked="" type="checkbox"/> N/A	<input checked="" type="checkbox"/> Hazardous Material <input checked="" type="checkbox"/> Human Waste <input type="checkbox"/> Damaged	0	0	0	0	Nothing stored due to needles, wet clothes, urine smell and garbage inside