

Navigation Team Litter Pick Journal

		Date of		
CSR Listing:	N/A	Inspection:	02/26/20)
	SE Chelan Ave SW and SW	Date of Clean-		
Site Address:	Spokane St	Up:	02/26/20	
Referred By:	CPT			
CSR Number:	N/A			
Field Coordinator (Initial		Photos	to	
Inspector):	Coney Moore	FAS?	⊠ Yes	□ No
Responding Field				
Coordinator:	Coney Moore			

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.

SITE OCCUPANCY DATA- Site occupancy must equal zero or photographic proof must show that the tents, structures, bedroll and residual materials are abandoned before a site may be determined a litter pick-up site. Litter removal in an active camp should be documenting on 72 Hour Journal.

Date of Event	Tents	Str	uctures	Bed Rolls	Vehicles	TOTAL	COUNT
02/26/20	1		0	0	0		1
SITE CHARACTERISICS				HEALTH COND	ITIONS	•	
Park		☐ Yes	⊠ No	Disorganized	⊠ Yes	□ No	
Sidewalk		☐ Yes	⊠ No	Garbage/Bagged		⊠ Yes	□ No
Within 50ft of a wate wetland	er body or	☐ Yes	⊠ No	Garbage/Loose		⊠ Yes	□ No
Roadway		☐ Yes	⊠ No	Garbage/Bulky Ite	ms	⊠ Yes	□ No
Within 50ft of a Guar	drail	⊠ Yes	□ No	Garbage/Metal		⊠ Yes	□ No
Heavy Traffic		☐ Yes	⊠ No	Human Waste		⊠ Yes	□ No
Near Industrial Zone		☐ Yes	⊠ No	Rats/Mice		☐ Yes	⊠ No
Forested Area		☐ Yes	⊠ No	Hazardous Materi	als	⊠ Yes	□ No
Play Area		☐ Yes	⊠ No	Falling Tree or Lim	bs	☐ Yes	⊠ No
Rented Area		☐ Yes	⊠ No	Chemical Waste		⊠ Yes	□ No
Slope		☐ Yes	⊠ No	Fires		☐ Yes	⊠ No
Slide Zone		☐ Yes	⊠ No	Criminal Activity		☐ Yes	⊠ No
Fire		☐ Yes	⊠ No	Weapons		☐ Yes	⊠ No
Other:		☐ Yes	⊠ No	Open Alcohol		⊠ Yes	□ No
Other:		☐ Yes	⊠ No	Sharps		⊠ Yes	□ No
Other:		☐ Yes	⊠ No	Property Damage		☐ Yes	⊠ No



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TOTAL COUNT:	1			TOTAL COUNT:	10			
Reason for Litter Remova	I							
☐ Blocking intended use of facility	□ Blo	cking intended	use of Park	☑ Public Health co	ncern			
_				_				
Litter onside walk	☐ Blo facility	cking intended	l use of	Safety or Hazard concern for others near litter				
	racinty			near nitler				
PRE-CLEAN UP ACTIVIT	TIFS			1				
PD or WSP officers are present to suppo					⊠ Yes □ No			
Crew is present and ready to support cle					✓ Yes ☐ No			
Emphasis Zone	- 1-		(Dat	e:)	☐ Yes ⊠ No			
OB SITE INSTRUCTIONS		Spe	cifications/N	lotes				
Fall Protection Required	☐ Yes	⊠ No						
Waste Hauling to Dump	⊠ Yes	□ No						
Waste Hauling to Other Location	⊠ Yes	□ No						
Vegetation Pruning	☐ Yes	⊠ No						
Biohazard Waste	⊠ Yes	□ No						
EXTERNAL CONTRACTORS	Total	Description	on					
Number of Labor Crew Involved Number of Hazmat Crew Involved	1	Cascadia						
Number of Truck Drivers Approved	1							
Number of Full Time Days On-site								
Approved Number of Partial Days On-site	0							
Approved	1							
Total Hours Approved	2							



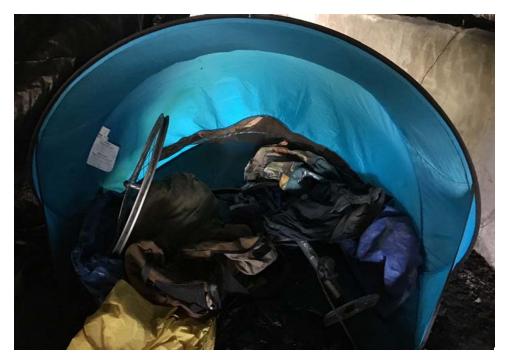
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INTERNAL CLEAN UP TEAMS	Total	Description
Number of Heavy Teams	0	
Number of Light Teams	0	
Number of Full Time Days On-site		
Approved	0	
Number of Partial Days On-site		
Approved	0	
Total Hours Approved	0	

Exh D - Clean Up Photos



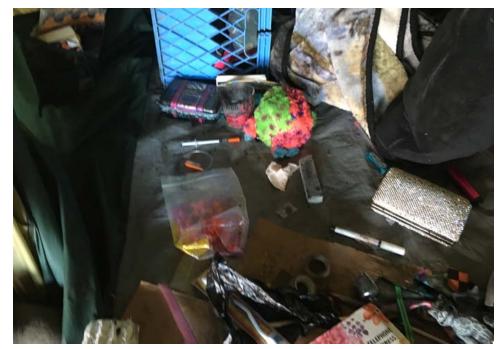


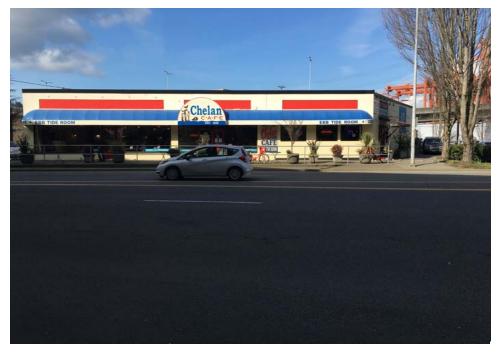


























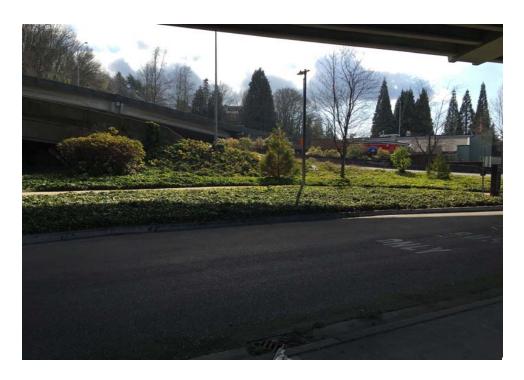
After Clean Photos









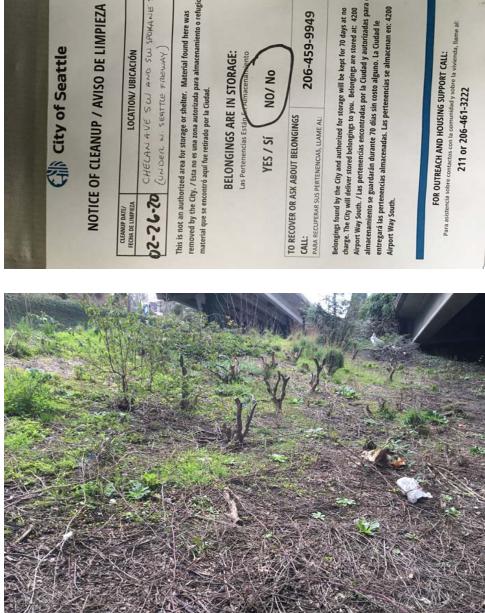












BELONGINGS ARE IN STORAGE:

encontró aquí fue retirado por la Ciudad.

NO/ No

YES / SÍ

CHELAN AVE SW AND SW SPOKA

LOCATION/ UBICACIÓN

City of Seattle

206-459-9949



FOR OUTREACH AND HOUSING SUPPORT CALL:





EXHIBIT E: STORAGE INFO

Encampment Response Team

Site Name:	SE Chelan Ave SW and SW Spokane St	Date of Clean Up:	02/26/20
		='	

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: Example: T1-JH-0428

Owner Name or Tent/Structure #	Owner Present?	Storage?	Not Storable? Check All That Apply	# of Bins	# of Bikes	# of Luggage	# of Large Items	Short Description
T1-CM-0226	☐ Yes 図 No	☐ Accepted ☐ Declined ☑ N/A	⋈ Hazardous Material⋈ Human Waste⋈ Damaged	0	0	0	0	I was informed by Officer Kohn the owner took what he wanted and asked that we dispose of everything. I inspected the tent due to not talking with the owner myself. The tent was not stored due to being ripped. Inside was a strong urine smell and multiple needles. Tent was unsafe to enter. Nothing was stored
	☐ Yes ☐ No	☐ Accepted ☐ Declined ☐ N/A	☐ Hazardous Material ☐ Human Waste ☐ Damaged					
	☐ Yes ☐ No	☐ Accepted ☐ Declined ☐ N/A	☐ Hazardous Material ☐ Human Waste ☐ Damaged					
	☐ Yes ☐ No	☐ Accepted ☐ Declined ☐ N/A	☐ Hazardous Material ☐ Human Waste ☐ Damaged					
	☐ Yes ☐ No	☐ Accepted ☐ Declined ☐ N/A	☐ Hazardous Material ☐ Human Waste ☐ Damaged					