



SITE JOURNAL CONTENTS

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A. SITE INSPECTION

To be filled out by the Field Coordinator prior to any Full Encampment Clean Up and as part of any Obstruction or Hazard Removal. Site Journals and photos should be saved in the appropriate location.

Encampment:	<u>Burke Gilman Trail at Meridian Ave N to I-5 Vicinity</u>		
Site Address:	<u></u>	Date of Inspection:	<u>4/10/2023</u>
	<u></u>	Date of Clean-Up:	<u>4/12/2023</u>
Final Inspector:	<u>Kareem Jenkins</u>	CSR #:	<u></u>
Referred By:	<u></u>	Photos to HSD?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



CPT/Bike SPD Response? ☐ Yes ☒ No

Date of Call to Duty Officer : _____

Time of Call to Duty Officer: _____

Date of Call to FC : _____

Time of Call to FC: _____

Date of FC Response : _____

Time FC arrived on site: _____

Time of FC departure from site: _____

Action: _____

System Navigator Called? ☐ Yes ☒ No

Name of SN: _____

Date of Call to SN : _____

Time of Call to SN: _____

Time SN arrived on site: _____

Offer of Shelter Made?: ☐ Yes ☒ No

SITE OCCUPANCY DATA

Date of Inspection	Tents	Structures	Bed Rolls	Vehicles	TOTAL COUNT
4/10/2023	3	0	0	0	3

PRIORITY CONDITION DATA

VULNERABLE POPULATIONS

Perceived Elderly (60+ years old) ☒ Yes ☐ No

PUBLIC HEALTH/BIOWASTE

Rats/Mice ☒ Yes ☐ No

Perceived Infants/Children (≤ 14 years old)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Perceived Youth (15-24 years old)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Perceived Not Ambulatory	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Perceived Wounds	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Near Facilities for Children (e.g., school, daycare)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Near Facilities for the Elderly (e.g., nursing home)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Perceived Women	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Perceived Couples	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
LGBTQIA (DATA ONLY COLLECTED IF ASKED-- otherwise leave blank)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
POC (DATA ONLY COLLECTED IF ASKED-- otherwise leave blank)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Presence of Alcohol	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Presence of Contained Sharps	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
TOTAL COUNT:		1

Hazardous Materials	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Bio Waste	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Chemical Waste	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Food Waste	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Within 50ft of a water body or wetland	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Loose Sharps	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
TOTAL COUNT:		5

SOLID WASTE

Disorganized Garbage	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Bagged Garbage	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Loose Garbage	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Bulky Items Garbage	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Metal	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
TOTAL COUNT:		3

PUBLIC SAFETY/STRUCTURAL CONCERNS

Weapons	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Park	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Sidewalk	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Proximity to Bridge	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Impeding Roadway	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

STRUCTURAL CONCERNS/ENVIRONMENTAL RISKS/EMERGENCY RISKS

Near Industrial Zone-blocking vehicle site lines	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Falling Trees/Limbs	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Forested Area	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Rented Area	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No



Within 50ft of a Guardrail	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Heavy Traffic	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Slope more than 27 degrees	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Slide Zone	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Fires	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Exposed Electrical Wiring	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Other	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

TOTAL COUNT:	0
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Property Damage

☒ Yes ☐ No

TOTAL COUNT:	1
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TOTAL SCORE:	32
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EXHIBIT A: SITE INSPECTION PHOTOS

During a site inspection, Field Coordinators should take photos of the following and store the photos in the appropriate G: Drive folder:

- Cross Street Signs
- Photos of Individual Tents
- Vehicle/RVs/License Plates
- General Photos of the Encampment
- Debris Fields

NAVIGATION TEAM ASSESSMENT



- ☐ Full encampment cleanup
- ☐ Litter pick
- ☐ Reported to SPU as illegal dump

B. OBSTRUCTION/HAZARD

- ☐ Clean - no campers

<input checked="" type="checkbox"/> Obstruction Removal	<input type="checkbox"/> Emphasis Zone	<input checked="" type="checkbox"/> Hazard Removal
<input checked="" type="checkbox"/> Blocking intended use of facility		<input checked="" type="checkbox"/> Safety of camper
<input type="checkbox"/> Tent on sidewalk		<input type="checkbox"/> Safety of others near and around camp
<input checked="" type="checkbox"/> Tent on median to adjacent sidewalk		<input type="checkbox"/> Safety of camper and others near and around camp

a. OBSTRUCTION/HAZARD PRE-CLEANUP ACTIVITIES

CHECKLIST *for* OBSTRUCTION CLEAN UP

- | | | | |
|--|-------|---|--|
| Notice posting is 72 hours in advance of cleanup (Date:) | _____ | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Cleanup is occurring on date specified in notice | | <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 |
| NOT REQUIRED but PROVIDED: | | | |
| Outreach was provided before the cleanup (Date:) | _____ | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |



b. OBSTRUCTION/HAZARD RESOURCE PLANNING

SITE CREW ASSESSMENT *of* FIELD CONDITIONS

JOB SITE INSTRUCTIONS

Fall Protection Required	<input type="checkbox"/> Yes	<input checked="" 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 type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Biohazard Waste	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Chemical Waste	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Specifications/Notes

EXTERNAL CONTRACTORS

	Total	Description
Number of Labor Crew	<u>2</u>	<u>Cascadia/Fresh Family</u>
Number of Hazmat Crew	<u>1</u>	<u></u>
Number of Truck Drivers	<u>2</u>	<u></u>
Contractors Labor Crew Hours On-Site	<u>4</u>	<u></u>



INTERNAL CLEAN UP TEAMS

	Total	Description
Number of Heavy Crew		
Heavy Crew Hours On-site		
Number of Labor Crew	1	SPR Light Team
Labor Crew Hours On-site	4	

STAGING LOCATION

Date/Time: _____ Location: _____

SITE POSTING PHOTOS

No Regular Encampment Clean-up: 72-hour Notice

- Cross Street Signs
- General Photos of the Encampment
- Close up to read post signage
- At a distance to view entire camp
- After Photos

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

OUTREACH REPORT

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

Date	Type	Location	Male Outreach	Female Outreach	Non-specific Gender	TOTAL # of People Contacted
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OBSTRUCTION SITE OCCUPANCY DATA

Date of Inspection	Tents	Structures	Bed Rolls	Vehicles	TOTAL COUNT
4/12/2023	2	0	0	0	2

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

- Owners who are present and accept storage
- Abandoned property that we are storing
- Abandoned property that we are disposing of and why

Each tent/structure/bedroll/vehicle should occupy one line so we can document if storage was offered, accepted and/or to explain why items were disposed of.

STORAGE TOTALS

Number of Bins	Bikes	Large Luggage Items	Large Items
0	0	0	0



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
T2-KJ-0412	No	N/A						
T1-KJ-0412	No	N/A						

Inspection Photos





Clean Up Photos






















After Clean Photos





City of Seattle

NOTICE OF CLEANUP / AVISO DE LIMPIEZA

CLEANUP DATE/ FECHA DE LIMPIEZA	LOCATION/ UBICACIÓN
04/12/23	Burke Gilman Trail from 1 st Ave NE to N 38 th St

This is not an authorized area for storage or shelter. Material found here was removed by the City. / Esta no es una zona autorizada para almacenamiento o refugio. El material que se encontró aquí fue retirado por la Ciudad.

BELONGINGS ARE IN STORAGE:
Las Pertenenencias Están En Almacenamiento

YES / SÍ ☒ NO / NO

TO RECOVER OR ASK ABOUT BELONGINGS CALL:
PARA RECUPERAR SUS PERTENENCIAS, LLAME AL:

206-459-9949

Belongings found by the City and authorized for storage will be placed into a secure facility within the City of Seattle and stored for 70 days at no charge. The City will deliver stored belongings to you / Las pertenencias encontradas por la Ciudad y autorizadas para el almacenamiento se colocarán en una instalación segura dentro de la Ciudad de Seattle y se almacenarán durante 70 días sin cargo. La Ciudad le entregará las pertenencias guardadas.

FOR OUTREACH AND HOUSING SUPPORT CALL:
Para asistencia sobre contactos con la comunidad y sobre la vivienda, llame al:

211 or 206-461-3222






Posting Photos





DATE of NOTICE:04/10/23

City of Seattle

NOTICE/AVISO

ORDER TO REMOVE ALL PERSONAL PROPERTY
ORDEN DE RETIRAR TODOS LOS BIENES PERSONALES

AS OF/ DESDE	TIME/ HORA	LOCATION/ UBICACIÓN
04/12/23	9:00 a.m.	Burke Gilman Trail from 1st Ave NE to N. 38th St.

Materials in this area are an obstruction of the intended use of this property, are in a hazardous location or present an American with Disabilities Act (ADA) obstruction. This is not an authorized area for storage or shelter. Any materials left here will be removed by the city on or after the date and time posted above, and belongings found by the City and authorized for storage will be placed into a secure facility within the City of Seattle and stored for 70 days at no charge. / Los materiales en esta área son una obstrucción del uso previsto de esta propiedad, están en un lugar peligroso o presentan una obstrucción de la Ley de Estadounidenses con Discapacidades (ADA). Esta no es un área autorizada para almacenamiento o refugio. La Ciudad retirará todos los materiales que se dejen aquí en la fecha y hora indicadas anteriormente o después, y las pertenencias encontradas por la Ciudad y autorizadas para el almacenamiento se colocarán en una instalación segura dentro de la Ciudad de Seattle y se almacenarán durante 70 días sin cargo.

TO RECOVER OR ASK ABOUT STORAGE
OF BELONGINGS CALL: /PARA
RECUPERAR SUS PERTENENCIAS, LLAME
AL:

206-459-9949

FOR OUTREACH AND HOUSING SUPPORT CALL:

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