



**SITE JOURNAL CONTENTS**

- Completed Site Journal
- Exhibit A: Site Inspection Photos
- Exhibit B: Site Posting Photos
- Exhibit C: Outreach Report
- Exhibit D: Clean Up & Storage Photos
- Exhibit E: Storage Detail

**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.

<b>Encampment:</b>	Freeway Park		
<b>Site Address:</b>		<b>Date of Inspection:</b>	1/8/2024
		<b>Date of Clean-Up:</b>	1/9/2024
<b>Final Inspector:</b>	Kareem Jenkins	<b>CSR #:</b>	
<b>Referred By:</b>		<b>Photos to HSD?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**CPT/Bike SPD Response?** ☐ Yes ☒ No

<b>Date of Call to Duty Officer :</b>		<b>Time of Call to Duty Officer:</b>	
<b>Date of Call to FC :</b>		<b>Time of Call to FC:</b>	
<b>Date of FC Response :</b>		<b>Time FC arrived on site:</b>	



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
1/8/2024	3	1	1	0	5

### PRIORITY CONDITION DATA

#### VULNERABLE POPULATIONS

Perceived Elderly (60+ years old)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Perceived Infants/Children ( $\leq 14$ 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

#### PUBLIC HEALTH/BIOWASTE

Rats/Mice	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
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 type="checkbox"/> Yes	<input checked="" 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



Near Facilities for the Elderly (e.g., nursing home)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Perceived Women	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Perceived Couples	<input checked="" type="checkbox"/> Yes	<input 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 type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Presence of Contained Sharps	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<b>TOTAL COUNT:</b>		0

Loose Sharps	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<b>TOTAL COUNT:</b>		5
<b>SOLID WASTE</b>		
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
<b>TOTAL COUNT:</b>		3

### PUBLIC SAFETY/STRUCTURAL CONCERNS

Weapons	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Park	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Sidewalk	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Proximity to Bridge	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Impeding Roadway	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Within 50ft of a Guardrail	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Heavy Traffic	<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
Property Damage	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<b>TOTAL COUNT:</b>		1



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 checked="" type="checkbox"/> Yes	<input 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

<b>TOTAL COUNT:</b>	4
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<b>TOTAL SCORE:</b>	39
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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





- ☐ Obstruction or hazard cleanup
- ☐ Clean - no campers

## B. OBSTRUCTION/HAZARD

<input checked="" type="checkbox"/> <b>Obstruction Removal</b>	<input type="checkbox"/> <b>Emphasis Zone</b>	<input checked="" type="checkbox"/> <b>Hazard Removal</b>
<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 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 type="checkbox"/> Yes            | <input checked="" 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            |
| <b>NOT REQUIRED but PROVIDED:</b>                        |       |   |  |
| 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 type="checkbox"/> Yes	<input checked="" 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

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EXTERNAL CONTRACTORS

	Total	Description
Number of Labor Crew	1	Cascadia
Number of Hazmat Crew	1	
Number of Truck Drivers	1	
Contractors Labor Crew Hours On-Site	2	

INTERNAL CLEAN UP TEAMS

	Total	Description
Number of Heavy Crew		



Heavy Crew Hours On-site

Number of Labor Crew

Labor Crew Hours On-site

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**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
1/9/2024	1	1	1	0	3

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
1	0	0	0

Owner Name OR	Owner	Storage?	Not Storable?	# of	# of	# of	# of Large	Short Description
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Tent/Structure #	Present?	Check All That Apply		Bins	Bikes	Luggage	Items
T1-KJ-0109	No	N/A		1			1- Planning calendar with Name Ashley Joy Abrahamson 1-Writng notebook with Ashley Abrahamson and Jacob Lopez Green tent damage/food/items outside tent(wet)-dispose of. 1-Green blanket; 1-brown blanket; 1- blue and pink makeup bag; 1- light blue Stanley cup; 1- box of candles; 1- brown duffel bag with hair straightner and black and white blanket.





## Inspection Photos

































## Clean Up Photos







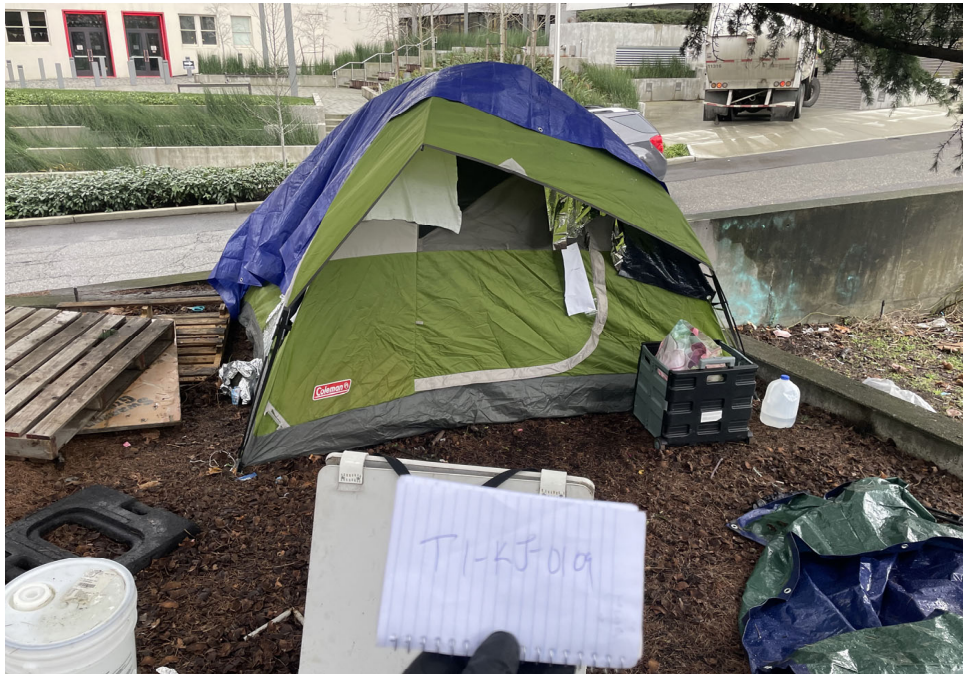






















## After Clean Photos










Posting Photos



DATE OF NOTICE 01/06/24

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
01/06/24	10:00 a.m.	Fremont Park

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:  
para asistencia sobre los contactos con la comunidad y sobre la vivienda, llame al:

211 or 206-461-3222





