



**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>      | <u>7th Ave S &amp; S Alaska Vicinity</u> |                            |   |
| <b>Site Address:</b>    | <u></u>                                  | <b>Date of Inspection:</b> | <u>8/5/2025</u>   |
|                         | <u></u>                                  | <b>Date of Clean-Up:</b>   | <u>8/8/2025</u>   |
| <b>Final Inspector:</b> | <u>Landon Messer</u>                     | <b>CSR #:</b>              | <u></u>   |
| <b>Referred By:</b>     | <u></u>                                  | <b>Photos to HSD?</b>      | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |

**CPT/Bike SPD Response?**      ☐ Yes    ☒ No

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



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 |
|--------------------|-------|------------|-----------|----------|-------------|
| 8/8/2025           | 2     | 0          | 0         | 0        | 2           |

### 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 type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Hazardous Materials                    | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Bio Waste                              | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Chemical Waste                         | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| Food Waste                             | <input type="checkbox"/> Yes | <input checked="" 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 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--<br>otherwise leave blank) | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| POC (DATA ONLY COLLECTED IF ASKED--<br>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 type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| <b>TOTAL COUNT:</b>   |                              | 0                                      |

 Loose Sharps ☐ Yes ☒ No

**TOTAL COUNT:** 0

**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 checked="" type="checkbox"/> Yes | <input type="checkbox"/> No            |
| Metal                | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |

**TOTAL COUNT:** 4

**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 checked="" type="checkbox"/> Yes | <input 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 |
| Within 50ft of a Guardrail | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| Heavy Traffic              | <input checked="" type="checkbox"/> Yes | <input 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 type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

**TOTAL COUNT:** 0



|                            |                              |  |
|----------------------------|------------------------------|--|
| 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 |

|                     |   |
|---------------------|---|
| <b>TOTAL COUNT:</b> | 2 |
|---------------------|---|

|                     |    |
|---------------------|----|
| <b>TOTAL SCORE:</b> | 14 |
|---------------------|----|

#### 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 type="checkbox"/> <b>Hazard Removal</b>                            |
| <input checked="" type="checkbox"/> Blocking intended use of facility |   | <input type="checkbox"/> Safety of camper                                 |
| <input checked="" 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 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            |
| <b>NOT REQUIRED but PROVIDED:</b>                        |          |   |  |
| Outreach was provided before the cleanup (Date:)         | 8/5/2025 | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No            |



**Encampment Response Team**

## SITE CREW ASSESSMENT *of* FIELD CONDITIONS

### Specifications/Notes

☐ Yes      ☒ No

☒ Yes      ☐ No

☐ Yes      ☒ No

☐ Yes      ☒ No

☐ Yes      ☒ No

☐ Yes      ☒ No

### Description

1

## 2 Cascadia 1 truck and trailer

\_\_\_\_\_

---

4

### Description

\_\_\_\_\_



Heavy Crew Hours On-site

Number of Labor Crew

1

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 |
|------|------|----------|---------------|-----------------|---------------------|-----------------------------|
|------|------|----------|---------------|-----------------|---------------------|-----------------------------|

**OBSTRUCTION SITE OCCUPANCY DATA**

| Date of Inspection | Tents | Structures | Bed Rolls | Vehicles | TOTAL COUNT |
|--------------------|-------|------------|-----------|----------|-------------|
| 8/6/2025           | 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 | Owner | Storage? | Not Storable? | # of | # of | # of | # of Large | Short Description |
|---------------|-------|----------|---------------|------|------|------|------------|-------------------|
|---------------|-------|----------|---------------|------|------|------|------------|-------------------|



## Inspection Photos












DATE of NOTICE: 08/01/2025

 **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  |
|--------------|------------|--|
| 08/05/25     | 09:00 AM   | S Andover St to S Edmunds St<br>and from Airport Way S to 4th<br>Ave S |

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 in a storage 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 encuentran 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: | <b>206-459-9949</b> |
|--|---------------------|

**FOR OUTREACH AND HOUSING SUPPORT CALL:**  
Para asistencia sobre contactos con la comunidad y sobre la vivienda, llame al:  
**211 or 206-461-3222**

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