DISASTER DETAIL DAILY REPORT
FWC STAFF

Disaster: _____

Employee Name: _____
as it appears on your personnel records

Position: _____

Month of: _____	Type of Work being performed (Debris Removal, Emergency Protective Measures, Bldg & Equipment Repairs, etc.) *	Location and County	# of Vehicle Miles Driven	Vehicle Property #	Make & Model of Vehicle	Type of Equipment ****			
Day						Equip. Type	Horsepower/ cc	Capacity Size	Hours Used

* Emergency Protective measures include moving and securing equipment, securing buildings, search and rescue, security, activation of and working at the EOC. Be specific as to which one is being performed.

Debris Removal can be included only if it is to remove debris from public access areas or buildings and equipment.

Do not code information as Building and Equipment Repairs if it is to protect the building or equipment from the hurricane. This is used only in repairing the damaged buildings or equipment.

** Vehicle Running Idle Hours - Explain why the vehicle was running idle and if bar lights were on, etc.

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*** If there is more than one employee in the boat, only the operator shows the hours and horsepower.

**** For chainsaws the length of the bar is the capacity size. For most other equipment it will be horsepower, cc, cubic yards, etc.