

EVACUATION REPORT/SURVEY

To Be Completed by ALL Wardens and Monitors

Following a partial or full evacuation, the Emergency Coordinators and Floor Wardens and Monitors are to complete this form. All requested information should be provided. If necessary, additional sheets are recommended for comments. Floor Wardens/Monitors should forward their completed report to their HSSO. HSSO's should review all reports for completeness, consolidate multiple reports, prepare an overall summary report and keep a copy for their record. The HSSO should forward all completed reports, along with the summary report, to the Director, Office of Management Services. All reports are due to the Director, Office of Management Services by Close of Business the day following the evacuation event.

1a. Date of Evacuation: _____

1b. Time of Evacuation: _____

2. Indicate time elapsed (to the nearest minute) from the sounding of the alarm until all employees/visitors evacuated the area.

3. Number of employees/visitors within your area of responsibility, approximately _____

4. Was evacuation orderly? YES NO

4a. If not, why? _____

5. Could Fire Alarm be heard? YES NO

5a. If no, indicate the locations at which they couldn't be heard _____

6. Did Strobe Lights operate? YES NO

6a. If no, indicate the locations at which they did not operate _____

7. If the public address system was used, was the evacuation announcement broadcasted in a loud, clear manner? YES NO

7a. If no, indicate locations and faults. _____

8. Was an outside all clear announcement given? YES NO

9. What hinderances to rapid evacuation, if any, were encountered?

10. Did the mobility evacuation personnel assigned to special duties carry out their assignments? YES NO

10a. If no, explain:

11. How many minutes were required for employees to return to their floor? _____

12. Was the evacuation satisfactory? YES NO

13. What suggestions or comments do you have concerning this evacuation?

GSA Building Floor: _____

Name of Floor Warden/Monitor: _____

Name of Person Preparing Report: _____

Report Preparer's Signature: _____

OEP Assignment: _____

Telephone Number: _____