WEATHER RELATED INCIDENT

MAJOR INCIDENT REPORTING FORM

DUTY OFFICER INFORMATION:

- 1. INCIDENT NAME: _____
- 2. PREPARED BY: ____ PHONE: ____ DATE: ____ TIME: ____
- 3. STATUS: _____
- 4. LOCATION AND DESCRIPTION
 - a. NATURE OF INCIDENT: _____
 - b. INCIDENT LOCATION:
 - c. INCIDENT CITY: _____
 - d. REPORTING AGENCY/NAME:
- 5. CURRENT ORGANIZATION
 - a. INCIDENT COMMANDER: _____
 - b. COMMAND AGENCY: _____
 - c. CONTACT PHONE: _____
- 6. RESOURCES SUMMARY
 - a. LOCAL RESPONDERS: _____
 - b. STATE: _____
 - c. FEDERAL:
 - d. VOLUNTEER/PRIVATE:
- 7. INCIDENT SUMMARY
 - a. GENERAL
 - i. DEATHS: _____
 - ii. INJURIES: _____
 - b. DAMAGES: _____
 - c. SUMMARY:
- 8. DUTY OFFICER CALLED (605-773-3231)/emailed (sdoemdutyofficer@state.sd.us):
- 9. REGION 6 COORDINATOR CALLED (605-770-9540)/emailed (adam.frerichs@state.sd.us):

NON-DUTY OFFICER INFORMATION:

 TYPE OF INCIDENT:
 FIRE
 FLOOD
 TORNADO
 SEVERE WEATHER
 OTHER

 CURRENT WEATHER CONDITIONS AT SCENE:

 WIND SPEED:

 DIRECTION:

 TEMPERATURE:

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 CLIMATE:

PHOTO #<u>1</u> DESCRIPTION: _____

PHOTO #<u>2</u> DESCRIPTION: _____