

Situation Report (SITREP)

The purpose of this form is to report on weather and environmental conditions for an event that CERT is participating in.

Tab - to move forward
Shift + Tab - to move backwards
Space Bar - to select

① ***Incident:** _____

② ***Reported to 911?** No Yes - Fire Yes - Police Yes- EMS

***Reporting Party:**

③ First Name: _____ ④ Last Name: _____

⑤ **Amateur Radio Callsign:** _____ ⑥ **Skywarn Number:** _____ ⑦ **Grid Square:** _____

⑧ ***Address:** Street Address _____

⑨ Address Line 2 _____

⑩ City: _____ ⑪ State: _____ ⑫ Zip Code: _____ ⑬ Country: _____

⑭ ***Primary Contact Number:** (_____) _____

⑮ ***District:** South Hilo North Hilo Hamakua North Kohala South Kohala
 North Kona South Kona Kau Upper Puna Lower Puna Other

⑯ ***Reporting Location:** At the physical location above Other _____

Weather Observations:

⑰ ***Rain:** None Light Moderate Heavy

⑱ **Rain Condition:** N/A Rain Steady & Continuous Showers Start & Stop Abruptly

⑲ ***Winds:** None Light Moderate Heavy

⑳ **Wind Direction:** N/A North Northwest West Southwest
 South Southeast East Northeast

㉑ **Estimated Wind Speeds:** N/A 0 Mph 1-3 Mph (Light) 4-7 Mph (Light)

8-12 Mph (Light) 13-18 Mph (Light) 19-24 Mph (Moderate) 25-31 Mph (Moderate)

32-38 Mph (Moderate) 39-46 Mph (Heavy) 47-54 Mph (Heavy) 55-73 Mph (Heavy)

74 Mph or Above (Hurricane)

Ocean Conditions:

㉒ ***Surf:** N/A Flat to 1ft 2ft - Knee High 3ft - Waist High 5ft - Head High
 6ft - Over Head 12ft - Double Over Head 18ft or Greater - Triple Over Head or Greater

㉓ **Additional Notation on Surf Conditions:** _____

㉔ **Tide Conditions:** N/A Mean Sea Level Normal Tide Low Tide +1"
 +2" +3" +4" +5" +6" Greater than 6"

㉕ **Additional Notation on Tide Conditions:** _____

Community Conditions:

②⑥ *Flooding: None Light Moderate Heavy Extreme

②⑦ Flooding Description: _____

②⑧ *Road Closures: None Partial Full

②⑨ Closure Description: _____

③⑩ *Structural Damage: None Light Moderate Heavy

③① Damage Description: _____

Electrical Conditions:

③② *Power Outage at your Location: No Yes ③③ Damaged Electrical Pole Number: _____

③④ Pole Damage Description: _____

Other Information: Add any additional information that may be pertinent to this report.

③⑤ Additional Comments: _____

③⑥ *Reporting Party Email Address: _____

For SPOKE Use:

MM/DD/YYYY

24:00 HOUR

*Message Sent to (Callsign): _____ *Date Sent: _____ *Time Sent: _____

Sender Message Number: _____ Receiver Message Number: _____