



# Warren County Office of Emergency Management

## Municipal Status Report Form

Incident \_\_\_\_\_

Municipality _____	Contact # _____
Date & Time _____	Contact # _____
Coordinator _____	EOC Phone # _____
Person Reporting _____	EOC Fax # _____
EOC Status _____	
EOC Email _____	
Disaster Declared <b>Yes</b> Date & Time _____	<b>No</b> _____
Disaster Rescinded <b>Yes</b> Date & Time _____	<b>No</b> _____

### School Status

District	Impact
1. _____	_____
2. _____	_____
3. _____	_____

### Utility Outages

Utility Name	# Affected
Power _____	_____
Gas _____	_____
Water _____	_____
Sewer _____	_____
Cable _____	_____
Phone _____	_____

### Shelters Established

Name	Type	Capacity	Current # in Shelter
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____

### Street Closures

Street Name / Route #	Mileposts / Cross Streets	Direction Affected
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____

### Other Reportable Information