

Stanislaus County Facility Resource Survey

SITE & LOCATION NAME

Date Updated

Site Name (i.e. Modesto High School):

Location Name (i.e. Gymnasium):

SITE INSPECTED AND ACCEPTABLE FOR

Square footage of location:

Potential Site Usage:

- Primary Shelter
- Client Service Center (minimum 1,000 Sq.Ft.)
- Secondary Shelter
- Pet Shelter
- Respite/Evacuation Site Only (no overnight use)

Potential Medical Usage:

- Alternate Care Site
- Mass Vaccination/Point of Distribution

Shelter Capacity- Overnight use expected:
(Number assumes total Sq.Ft. divided by 40 Sq.Ft. per person with 10% of the population being persons with functional need, requiring 60 Sq.Ft.)

General Assembly Capacity- No overnight use: (Total Sq.Ft. divided by 20 Sq.Ft. per person)

Based on the capacity for Shelter use, this location will fall into one of the following capacity classifications:

- Shelter Use Class 1= 1 to 100
- Shelter Use Class 2= 101 to 250
- Shelter Use Class 3= 251 to 1000
- Shelter Use Class 4= 1001 to 2500
- Shelter Use Class 5= 2501 +

Based on the capacity for General Assembly use, this location will fall into one of the following capacity classifications:

- General Use Class 1= 1 to 100
- General Use Class 2= 101 to 250
- General Use Class 3= 251 to 1000
- General Use Class 4= 1001 to 2500
- General Use Class 5= 2501 +

FACILITY AVAILABILITY

Available any time

Blackout Date 1: from

thru

Blackout Date 2: from

thru

Blackout Date 3: from

thru

FACILITY CONTACT(S) (Include Facility Maintenance and/or Custodial Contacts)

Contact #1: Title: e-Mail:
 Daytime Phone: Alternate Phone:
 After Hours Phone: Fax Number

Contact #2: Title: e-Mail:
 Daytime Phone: Alternate Phone:
 After Hours Phone: Fax Number

Contact #3: Title: e-Mail:
 Daytime Phone: Alternate Phone:
 After Hours Phone: Fax Number

ADDRESS INFORMATION

Site Name:

Street Address: Cross Street:

City: State: Zip:

Longitude Latitude

Thomas Guide Map Page Grid Number

Mailing Address (If different from above):

SITE INFORMATION

Access to more than one major road or highway from site

Access to public transportation Distance from nearest public bus or train stop:

PARKING: List any available parking lots on the site (e.g. Parking Lot 1, Parking Lot 2, etc.)

List Parking Lot	Total # of Spaces	# of ADA Spaces	Type of Surface	Trucks OK?
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>

EXTERIOR SPACES: List any usable exterior space on the site (e.g. athletic field, courtyard, playground, etc.)

Exterior Space	Total #	Fenced?	Equipment (e.g. seating, play)
	<input type="text"/>	<input type="checkbox"/>	
	<input type="text"/>	<input type="checkbox"/>	
	<input type="text"/>	<input type="checkbox"/>	
	<input type="text"/>	<input type="checkbox"/>	
	<input type="text"/>	<input type="checkbox"/>	
	<input type="text"/>	<input type="checkbox"/>	

Regardless if the answer to questions below are YES, NO, or N/A, please put actual measurement where indicated

SECTION 1: PARKING- If off street parking is available		MIN/MAX	ACTUAL
<u>If off Street parking is N/A, skip to #8</u>			
1. Is there one or more off-street parking spaces either permanently or temporarily designated for people with disabilities? (1 van accessible space for every 25 regular spaces, e.g., 1-25 = 1 van accessible space).	<input type="text"/>	Car 9 ft. wide 18 ft. long 5 ft. aisle	<input type="text"/>
2. Is there at least one parking space that is van accessible for every 25 spaces?	<input type="text"/>	Van 9 ft. wide 18 ft. long 8 ft. aisle	<input type="text"/>
3. Are parking spaces on level ground?	<input type="text"/>	Maximum 2% slope	<input type="text"/>
4. Is the parking area surface stable, firm and slip resistant?	<input type="text"/>	Concrete, asphalt, no gravel	<input type="text"/>
5. Is the disabled parking space in the closest location to the accessible entrance/pathway to the Shelter?	<input type="text"/>	N/A	<input type="text"/>
6. Is there signage at the front of the parking stall that identifies the space as reserved, by displaying the international symbol of accessibility so that it is readily visible to passing traffic even if the space is occupied?	<input type="text"/>	80" at the lowest edge of the sign	<input type="text"/>
7. Is there an accessible route from the parking area to an accessible path of travel (continuous common surface)?	<input type="text"/>	Minimum 48" wide 36" min. at a single point	<input type="text"/>
8. Grates- Does the walking path have grating that runs perpendicular to the path of travel?	<input type="text"/>	No greater than 1/2" wide	<input type="text"/>
Comments:			
<input style="height: 80px;" type="text"/>			

BUILDING EXTERIOR

Path of Travel- Parking Area to the Shelter Entrance:		MIN/MAX	ACTUAL
1. Is an accessible route provided from accessible parking to the accessible entrance to the building?	<input type="checkbox"/>	48" wide 36" wide at a single point	<input type="checkbox"/>
2. Is an accessible route provided from public sidewalks and public transportation stops to the accessible entrance of the emergency shelter?	<input type="checkbox"/>	48" wide 36" wide at a single point	<input type="checkbox"/>
3. Is the surface of the path of travel stable, firm and slip resistant?	<input type="checkbox"/>	Concrete, asphalt, no gravel	<input type="checkbox"/>
4. Is the path of travel to the building an accessible width?	<input type="checkbox"/>	48" wide 36" wide at a single point	<input type="checkbox"/>
5. Is there a continuous common surface not interrupted by non-ramped steps or by abrupt changes in level in the path of travel to the entrance?	<input type="checkbox"/>	1/4" high or beveled from 1/4" to 1/2" high	<input type="checkbox"/>
6. Is the path of travel to the building entrance free of obstructions (fire hydrants, tree trunks, etc.)?	<input type="checkbox"/>	Min if 36" wide	<input type="checkbox"/>
7. Is the path of travel to the emergency shelter free of any objects (e.g., wall mounted boxes, signs, tree branches, etc.)?	<input type="checkbox"/>	Bottom edge lower than 27" high or higher than 80" extending no more than 4" into the path of travel	<input type="checkbox"/>
7a. If answer to 7 is no, can the object be lowered, removed, or modified?	<input type="checkbox"/>		<input type="checkbox"/>
Comments:			

Path of Travel- Parking Area to the Shelter Entrance: (CONTINUED)		MIN/MAX	ACTUAL
8. If there is an alternative path of travel from and to the parking lot for accessibility, is there a sign to identify the alternate route?	<input type="checkbox"/>	Bottom edge lower than 27" high or higher than 80" extending no more than 4" into the path of travel	<input type="checkbox"/>
9. Alternate Accessible Entrance Signage: If the main entrance is inaccessible, is the accessible alternate entrance clearly marked?	<input type="checkbox"/>	Same as Item #8	<input type="checkbox"/>
Ramps:			
<input type="checkbox"/> Accessible Doorways (min. 36" wide)? <input type="checkbox"/> Access Ramps <input type="checkbox"/> Curb Outs <input type="checkbox"/> Automatic doors or appropriate door handles?			
1. If there are stairs at the main entrance, is there also a ramp or lift, or is there an alternative accessible entrance?	<input type="checkbox"/>	N/A	<input type="checkbox"/>
2. Do all ramps have a slope rise no greater than one inch in 12 inches on the horizontal run?	<input type="checkbox"/>	1:50 or 2% max slope	<input type="checkbox"/>
3. Ramp width?	<input type="checkbox"/>	48" min	<input type="checkbox"/>
4. Does the ramp have edge protection in the form of walls on each side, or wheel guides, or raised curbs?	<input type="checkbox"/>	N/A	<input type="checkbox"/>
5. Do ramps have a slip-resistant surface?	<input type="checkbox"/>	N/A	<input type="checkbox"/>
6. If a ramp rises more than 6 inches, or if it is longer than 72", does it have handrails in both sides?	<input type="checkbox"/>	Between 34" to 38" above the surface of the ramp	<input type="checkbox"/>
7. Is there a landing at both the top and bottom of the ramp? **NOTE** THIS IS REQUIRED AT EVERY CHANGE OF RAMP DIRECTION	<input type="checkbox"/>	5' X 5' level landing at the top and bottom at every 30" of rise	<input type="checkbox"/>
Comments:			

STRUCTURE

Structure Type: <input type="text"/>	Construction Year: <input type="text"/>
Has the building been earthquake retrofitted? <input type="checkbox"/>	If yes, Date of Last Retrofit? <input type="text"/>
Is there a loading dock available? <input type="checkbox"/>	Description: <input type="text"/>
Is there a staging area available? <input type="checkbox"/>	Description: <input type="text"/>
Are there external electrical outlets? <input type="checkbox"/>	
Is there sufficient outdoor lighting? <input type="checkbox"/>	
Comments:	
<input type="text"/>	

BUILDING INTERIOR SPACES:

of Stories: Elevator(s)? Movement between floors ADA accessible?

Elevators:		MIN/MAX	ACTUAL
1. If an elevator is required to reach the shelter area, is the elevator doorway wide enough for a wheel chair user?	<input type="text"/>	At least 36" clearance	<input type="text"/>
2. Is the elevator cab size?	<input type="text"/>	68" wide by 51" deep	<input type="text"/>
3. Are elevator controls clearly marked with raised lettering for visually impaired persons?	<input type="text"/>	Braille Lettering	<input type="text"/>

Elevators: (CONTINUED)		MIN/MAX	ACTUAL
4. Are the elevator controls low enough for a person in a wheelchair to reach?	<input type="checkbox"/>	No higher than 54" from the elevator floor	<input type="checkbox"/>
Comments:			
Features Inside the Shelter Area:			
1. Is there a provision for people to fill out paperwork in a seated position at a table that is accessible to a wheelchair user?	<input type="checkbox"/>	Table 28" to 34" high max Knee space 27"high to 30" wide & 19" deep	<input type="checkbox"/>
2. If filling out paperwork in a seated position, is adequate privacy guaranteed?	<input type="checkbox"/>	N/A	<input type="checkbox"/>
3. Is seating available for people waiting their turn to enter the shelter who cannot stand for long periods of time? (not required)	<input type="checkbox"/>	N/A	<input type="checkbox"/>
4. Is the inside if the shelter area free of any objects (e.g., wall mounted boxes, signs, etc.) that a person with a visual impairment or other disability might bump into?	<input type="checkbox"/>	Bottom edge lower than 27" high, or higher than 80" extending no more than 4" into the path of travel	<input type="checkbox"/>
Comments:			

BUILDING FURNITURE

Furniture	Approx. #	Description
Tables	<input type="text"/>	<input type="text"/>
Chairs	<input type="text"/>	<input type="text"/>
Cafeteria Tables/Benches	<input type="text"/>	<input type="text"/>
Desks	<input type="text"/>	<input type="text"/>
Portable Room Dividers	<input type="text"/>	<input type="text"/>

FOOD PREPARATION FACILITIES

None on site Warming Oven Kitchen Full Service Kitchen Facility Rep required on site when using kitchen?

Capacity For Eating Contact Name/Phone

Snack Bar Eating Capacity Other Indoor Seating

Equipment	Quantity	Size	Equipment	Quantity	Size	Equipment	Quantity	Size
Refrigerator	<input type="text"/>	<input type="text"/>	Walk-in Refrigerator	<input type="text"/>	<input type="text"/>	Ice Machine	<input type="text"/>	<input type="text"/>
Freezer	<input type="text"/>	<input type="text"/>	Walk-in Freezer	<input type="text"/>	<input type="text"/>	Braising Pan	<input type="text"/>	<input type="text"/>
Burner	<input type="text"/>	<input type="text"/>	Griddle	<input type="text"/>	<input type="text"/>	Warmer	<input type="text"/>	<input type="text"/>
Oven	<input type="text"/>	<input type="text"/>	Convection Oven	<input type="text"/>	<input type="text"/>	Microwave Oven	<input type="text"/>	<input type="text"/>
Steamer	<input type="text"/>	<input type="text"/>	Steam Kettles	<input type="text"/>	<input type="text"/>	Sinks	<input type="text"/>	<input type="text"/>
Dishwasher	<input type="text"/>	<input type="text"/>	Deep Fryer	<input type="text"/>	<input type="text"/>	Coffee Maker	<input type="text"/>	<input type="text"/>

Comments:

SANITATION

Potable water source: Solid waste collection service company:

Sewer: Hot Water on Site?

Sanitation Amenities	# Men	# Women	# Unisex	# Disabled Men	# Disabled Women	Stalls
Toilets	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Disabled Toilets	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Urinals	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sinks	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Showers	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Towels	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Comments:

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Restrooms:

		MIN/MAX	ACTUAL
1. Is there sufficient clearance area on the floor in the direction of the door swing for a wheelchair to maneuver?	<input style="width: 100px; height: 20px;" type="text"/>	60" diameter turning space or 56"X63" clear space	<input style="width: 50px; height: 50px;" type="text"/>
2. a. Is there an accessible toilet area? b. Stall door with automatic closing device? c. Handle below latch on door? d. Grab bars? e. Toilet seat height? f. Sufficient floor clearance in the room?	<input style="width: 100px; height: 20px;" type="text"/> <input style="width: 100px; height: 20px;" type="text"/> <input style="width: 100px; height: 20px;" type="text"/> <input style="width: 100px; height: 20px;" type="text"/> <input style="width: 100px; height: 20px;" type="text"/> <input style="width: 100px; height: 20px;" type="text"/>	(c.) Loop or U-shape handle (d.) 1 side wall & behind toilet (e.) 17" to 19" high (f.) 60" diam. or a T-turn clearance	<input style="width: 50px; height: 50px;" type="text"/>
3. Where urinals are provided, is there sufficient clear floor space in front of the urinal for a wheelchair user to approach?	<input style="width: 100px; height: 20px;" type="text"/>	30"X48"	<input style="width: 50px; height: 50px;" type="text"/>
4. a. Clear floor space in front of and under the sink for wheelchair? b. Sufficient counter height? c. Sufficient knee space? d. Compliant faucet hardware?	<input style="width: 100px; height: 20px;" type="text"/> <input style="width: 100px; height: 20px;" type="text"/> <input style="width: 100px; height: 20px;" type="text"/> <input style="width: 100px; height: 20px;" type="text"/>	(a.) 30"X48" (b.) 34" from floor max (c.) 29" down to 27" high at 8" back (d.) Shall be operable with a single effort	<input style="width: 50px; height: 50px;" type="text"/>
5. Are the following items within reach of a person in a wheelchair? a. Towel and/or hand dryer? b. Mirror? c. Sanitary napkins? d. Waste receptacles?	<input style="width: 100px; height: 20px;" type="text"/> <input style="width: 100px; height: 20px;" type="text"/> <input style="width: 100px; height: 20px;" type="text"/> <input style="width: 100px; height: 20px;" type="text"/>	40" high max	<input style="width: 50px; height: 50px;" type="text"/>

Comments:

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Other Building Features:

		MIN/MAX	ACTUAL
1. Door widths: are doorways in the path of travel sufficiently wide enough to accommodate a wheelchair?	<input style="width: 100px; height: 20px;" type="text"/>	36" with door open at 90°	<input style="width: 50px; height: 50px;" type="text"/>
2. Is there adequate space for a person in a wheelchair to turn around at the entrance?	<input style="width: 100px; height: 20px;" type="text"/>	5" diameter circle	<input style="width: 50px; height: 50px;" type="text"/>

Other Building Features: (CONTINUED)		MIN/MAX	ACTUAL
3. Are doorway thresholds no more than ½" in height?	<input type="text"/>	¼" high or beveled from ¼" to ½" high	<input type="text"/>
4. Are all doors equipped with either arch or lever type handles, push plates or automatic openers that can be used with a closed fist and are all handles no higher than 48"? a. if no, will the doors remain open?	<input type="text"/> <input type="text"/>	Door handle to be no more than 48" high	<input type="text"/>
5. Hallways and corridors in the path of travel?	<input type="text"/>	48" wide min	<input type="text"/>
6. Is there an adequate maneuvering clearance for a wheelchair on each side of the doorway?	<input type="text"/>	60" on the pull side and 48" on the push side	<input type="text"/>
Comments:			
<input type="text"/>			

UTILITIES

Laundry facilities available: # of Washers: # of Dryers:

Are laundry facilities coin operated?

Will the shelter workers or shelter residents have access to these machines?

Generator: If yes, list type and location:

Fuel Type: What does the generator power?:

Operating time, in hours, without refueling, at the rated capacity?:

Auto Start Manual Start Utility Company Name

Contact Name Emergency Phone #

Generator Fuel Vendor Emergency Phone #

Generator Repair Contact Emergency Phone #

Heating Electric Natural Gas Propane Fuel Oil

Utility/Vendor Name

Contact Name Emergency Phone #

Repair Contact Emergency Phone #

Cooling
 Electric Natural Gas Propane
Utility/Vendor Name Contact Name Emergency Phone # Repair Contact Emergency Phone # **Cooking**
 Electric Natural Gas Propane No cooking facilities at this site
Utility/Vendor Name Contact Name Emergency Phone # Repair Contact Emergency Phone # **Telephones**Utility/Vendor Name Contact Name Emergency Phone # Repair Contact Emergency Phone # **Water**
 Municipal Wells Trapped Water
Utility/Vendor Name Contact Name Emergency Phone # Repair Contact Emergency Phone # If trapped: Potable (drinkable) storage capacity in gallons: Non potable (undrinkable) storage capacity in gallons: **Communications**
 Business phones available to shelter staff? Phones available to shelter residents

Item	Location	How Many	Phone Number/ID #
<input type="text"/>		<input type="text"/>	
<input type="text"/>		<input type="text"/>	
<input type="text"/>		<input type="text"/>	
<input type="text"/>		<input type="text"/>	

Comments:

SAFETY/SECURITY

Facility grounds are secured (gates, fences)	<input type="text"/>	Full time emergency vehicle access (police, fire, ambulance)	<input type="text"/>
Building areas are securable (gated, fences)	<input type="text"/>	Buildings have key-card or other access method	<input type="text"/>
Buildings have security alarm systems	<input type="text"/>	Fire Alarm	<input type="text"/>
Sprinkler System	<input type="text"/>	Fire Extinguishers on-site	<input type="text"/>
Alarm systems are regularly maintained and tested	<input type="text"/>	Alarm systems are easily used by facility staff	<input type="text"/>

Planning Calculation Worksheet

Drinking Water

Projected Population x 3

- Total Available

Gallons of water needed

Cots & Blankets

Projected Population / 10 Projected Population / 5

- Total Available - Total Available

Cots needed Blankets needed

Toilets - *projected population / 40 = projected needed number of toilet facilities*

	Men	Women	Unisex	People with Disabilities
# of toilets available				
Projected need				
- Total Available				
Portable toilets needed				

Sinks - *the recommended ration of sinks is one sink for every two toilets*

	Men	Women	Unisex	People with Disabilities
# of sinks available				
Projected need				
- Total Available				
Portable sinks needed				

Showers - the best case scenario is one shower for every 40 residents.

	Men	Women	Unisex	People with Disabilities
# of showers available				
# of showers needed				

Are there any limitations on the availability of showers (time fo day, etc.)?

Alternatives for showers on site:

Alternatives for showers off site:

Shelter Feeding - Projected population x 5 = projected number of meals needed.

Projected Needed

- Total Available

Meals Needed

Feeding Areas

None on site

Snack Bar

Capacity

Cafeteria

Capacity

Other indoor seating

Describe, including size and capacity

Total estimated seating capacity for eating

Comments related to feeding

Health Services

Number of rooms available

Number of beds or cots available

Number of rooms needed

Number of beds or cots needed

Baby & Infant Support Supplies

Number of diapers available

Cans of formula available

Additional Information

Does the entity that plans to manage the shelter own the building?

If No, is there a current written agreement to use this site?

Is this facility within five miles of an evacuation route?

Is this facility within 10 miles of a nuclear power plant?

Groups associated with this facility

Facility staff required when using facility?

Paid feeding staff required when using this facility?

Church auxiliary required when using this facility?

Fire auxiliary required when using this facility?

Other requirements?

List Other Requirements

SUBMITTED BY:

Date: