

Appendix A

INCIDENT STATUS SUMMARY (ICS 209)

| | | | | |
|---|--|--|---|--|
| *1. Incident Name: Bayview Tornado | | 2. Incident Number: 0502 (from F and A) | | |
| *3. Report Version (check one box on left): <input checked="" type="checkbox"/> Initial Rpt # <input type="checkbox"/> Update (if used): <input type="checkbox"/> Final | *4. Incident Commander(s) & Agency or Organization: N. Kempfer-Needland Fire, D. Roberts-Needland EMS, K. Anthony-Granger Co. Sheriff's Office, J. Davila-Needland PD, D. Doan-Granger | 5. Incident Management Organization: Unified Command | *6. Incident Start Date/Time: Date: <u>5-2-2009</u> Time: <u>1719 hours</u> Time Zone: <u>Central</u> | |
| 7. Current Incident Size or Area Involved (use unit label – e.g., “sq mi,” “city block”): 9 Block area | 8. Percent (%) Contained Completed 20% | *9. Incident Definition: Tornado | 10. Incident Complexity Level: Type 3 | *11. For Time Period: From Date/Time: <u>5-2-2009/2029hrs</u> To Date/Time: <u>5-3-2009/0600hrs</u> |

Approval & Routing Information

| | |
|---|---|
| *12. Prepared By: Print Name: <u>SL Gaithe</u> ICS Position: <u>Planning Deputy</u> Date/Time Prepared: <u>May 09, 2009 / 2249 hours</u> | *13. Date/Time Submitted: 0600 hrs Time Zone: Central |
| *14. Approved By: Print Name: <u>A. Archer</u> ICS Position: <u>Planning Chief</u> Signature: _____ | *15. Primary Location, Organization, or Agency Sent To: EOC |

Incident Location Information

| | | |
|--|--|---|
| *16. State: Columbia | *17. County/Parish/Borough: Granger County | *18. City: Needland |
| 19. Unit or Other: Needland EMS, Needland Police, Needland Fire | *20. Incident Jurisdiction: City of Needland | 21. Incident Location Ownership (if different than jurisdiction): N/A |
| 22. Longitude (indicate format): -97 23' 38.30 Latitude (indicate format): 27 47' 38.99 | 23. US National Grid Reference: N/A | 24. Legal Description (township, section, range): Bayview area encompassing Bayview Convention Cntr |
| *25. Short Location or Area Description (list all affected areas or a reference point): City of Needland in Granger County, State of Columbia. The tornado struck the downtown area new the Bayview Convention Center. | | 26. UTM Coordinates: N/A |
| 27. Note any electronic geospatial data included or attached (indicate data format, content, and collection time information and labels): N/A | | |

Incident Summary

| | | | | |
|--|---------------------------------------|--------------------------|--------------|----------------|
| *28. Significant Events for the Time Period Reported (summarize significant progress made, evacuations, incident growth, etc.): Responders call to the scene of a tornado touchdown that damaged many building in a 9 block area of Baytown, Evacuation as well as search and rescue efforts are underway. As of 23:50 42 victims have been confirmed deceased and 983 injuries. | | | | |
| 29. Primary Materials or Hazards Involved (hazardous chemicals, fuel types, infectious agents, radiation, etc.): None known at this time. Mostly Structural Damage and poor weather is hampering rescue/recovery efforts. | | | | |
| 30. Damage Assessment Information (summarize damage and/or restriction of use or availability to residential or commercial property, natural resources, critical infrastructure and key resources, etc.): | A. Structural Summary | B. # Threatened (72 hrs) | C. # Damaged | D. # Destroyed |
| | E. Single Residences | | | |
| | F. Nonresidential Commercial Property | 50 | 12 | 5 |
| | Other Minor Structures | | | |
| | Other | | | |

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Additional Incident Decision Support Information

| | A. # This Reporting Period | B. Total # to Date | | A. # This Reporting Period | B. Total # to Date |
|--|----------------------------|--------------------|--|----------------------------|--------------------|
| *31. Public Status Summary: | | | *32. Responder Status Summary: | | |
| <i>C. Indicate Number of Civilians (Public) Below:</i> | | | <i>C. Indicate Number of Responders Below:</i> | | |
| D. Fatalities | 102 | | D. Fatalities | 4 | |
| E. With Injuries/Illness | 1837 | | E. With Injuries/Illness | | |
| F. Trapped/In Need of Rescue | | | F. Trapped/In Need of Rescue | | |
| G. Missing (note if estimated) | | | G. Missing | | |
| H. Evacuated (note if estimated) | | | H. Sheltering in Place | | |
| I. Sheltering in Place (note if estimated) | | | I. Have Received Immunizations | | |
| J. In Temporary Shelters (note if est.) | 700 | | J. Require Immunizations | | |
| K. Have Received Mass Immunizations | 0 | | K. In Quarantine | | |
| L. Require Immunizations (note if est.) | 0 | | | | |
| M. In Quarantine | 0 | | | | |
| <i>N. Total # Civilians (Public) Affected:</i> | | | <i>N. Total # Responders Affected:</i> | | |

| 33. Life, Safety, and Health Status/Threat Remarks: May trapped and missing victims | *34. Life, Safety, and Health Threat Management: <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 85%;"></th> <th style="width: 15%; text-align: center;">A. Check if Active</th> </tr> </thead> <tbody> <tr><td>A. No Likely Threat</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>B. Potential Future Threat</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>C. Mass Notifications in Progress</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>D. Mass Notifications Completed</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>E. No Evacuation(s) Imminent</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>F. Planning for Evacuation</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>G. Planning for Shelter-in-Place</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>H. Evacuation(s) in Progress</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>I. Shelter-in-Place in Progress</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>J. Repopulation in Progress</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td>K. Mass Immunization in Progress</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>L. Mass Immunization Complete</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>M. Quarantine in Progress</td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>N. Area Restriction in Effect</td><td style="text-align: center;"><input checked="" type="checkbox"/></td></tr> <tr><td></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td></td><td style="text-align: center;"><input type="checkbox"/></td></tr> </tbody> </table> | | A. Check if Active | A. No Likely Threat | <input type="checkbox"/> | B. Potential Future Threat | <input checked="" type="checkbox"/> | C. Mass Notifications in Progress | <input type="checkbox"/> | D. Mass Notifications Completed | <input type="checkbox"/> | E. No Evacuation(s) Imminent | <input type="checkbox"/> | F. Planning for Evacuation | <input type="checkbox"/> | G. Planning for Shelter-in-Place | <input type="checkbox"/> | H. Evacuation(s) in Progress | <input checked="" type="checkbox"/> | I. Shelter-in-Place in Progress | <input checked="" type="checkbox"/> | J. Repopulation in Progress | <input checked="" type="checkbox"/> | K. Mass Immunization in Progress | <input type="checkbox"/> | L. Mass Immunization Complete | <input type="checkbox"/> | M. Quarantine in Progress | <input type="checkbox"/> | N. Area Restriction in Effect | <input checked="" type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> |
|---|--|--|--------------------|---------------------|--------------------------|----------------------------|-------------------------------------|-----------------------------------|--------------------------|---------------------------------|--------------------------|------------------------------|--------------------------|----------------------------|--------------------------|----------------------------------|--------------------------|------------------------------|-------------------------------------|---------------------------------|-------------------------------------|-----------------------------|-------------------------------------|----------------------------------|--------------------------|-------------------------------|--------------------------|---------------------------|--------------------------|-------------------------------|-------------------------------------|--|--------------------------|--|--------------------------|--|--------------------------|--|--------------------------|
| | A. Check if Active | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A. No Likely Threat | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| B. Potential Future Threat | <input checked="" type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| C. Mass Notifications in Progress | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| D. Mass Notifications Completed | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| E. No Evacuation(s) Imminent | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| F. Planning for Evacuation | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| G. Planning for Shelter-in-Place | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| H. Evacuation(s) in Progress | <input checked="" type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| I. Shelter-in-Place in Progress | <input checked="" type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| K. Mass Immunization in Progress | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| L. Mass Immunization Complete | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| M. Quarantine in Progress | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| N. Area Restriction in Effect | <input checked="" type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 35. Weather Concerns (synopsis of current and predicted weather; discuss related factors that may cause concern): Heavy rain and severe weather | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

36. Projected Incident Activity, Potential, Movement, Escalation, or Spread and influencing factors during the next operational period and in 12-, 24-, 48-, and 72-hour timeframes:

12 hours: Search and rescue, looting, shelter for 1st responders, demobilization

24 hours: Treatment and transport of victims, restore utilities

48 hours: Area clean up

72 hours: Restore business

Anticipated after 72 hours: Rebuild

37. Strategic Objectives (define planned end-state for incident):

The desired outcome is to restore life and property to normal operation as soon as possible.

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Additional Incident Decision Support Information (continued)

38. Current Incident Threat Summary and Risk Information in 12-, 24-, 48-, and 72-hour timeframes and beyond. Summarize primary incident threats to life, property, communities and community stability, residences, health care facilities, other critical infrastructure and key resources, commercial facilities, natural and environmental resources, cultural resources, and continuity of operations and/or business. Identify corresponding incident-related potential economic or cascading impacts.

12 hours: Heavy casualties taxing the EMS system. Severe weather, need for additional Engines

24 hours: N/A

48 hours: Need for relief teams, supplies and equipment

72 hours: Need for supplies, food and drink

Anticipated after 72 hours: Same

39. Critical Resource Needs in 12-, 24-, 48-, and 72-hour timeframes and beyond to meet critical incident objectives. List resource category, kind, and/or type, and amount needed, in priority order:

12 hours: Loss of 6 Engines that are needed by to their community

24 hours:

48 hours:

72 hours:

Anticipated after 72 hours:

40. Strategic Discussion: Explain the relation of overall strategy, constraints, and current available information to:

- 1) critical resource needs identified above,
- 2) the Incident Action Plan and management objectives and targets,
- 3) anticipated results.

Explain major problems and concerns such as operational challenges, incident management problems, and social, political, economic, or environmental concerns or impacts.

41. Planned Actions for Next Operational Period:

Continue with search, rescue and safety operations

42. Projected Final Incident Size/Area (use unit label – e.g., “sq mi”): 9 Sq blocks

43. Anticipated Incident Management Completion Date: Unkown

44. Projected Significant Resource Demobilization Start Date: 4 May 2009

45. Estimated Incident Costs to Date: 277,578

46. Projected Final Incident Cost Estimate: Unknown

47. Remarks (or continuation of any blocks above – list block number in notation):

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Incident Resource Commitment Summary

| 48. Agency or Organization: | 49. Resources (summarize resources by category, kind, and/or type; show # of resources on top 1/2 of box, show # of personnel associated with resource on bottom 1/2 of box): | | | | | | | | | | | | | | | | | 50. Additional Personnel not assigned to a resource: | 51. Total Personnel (includes those associated with resources – e.g., aircraft or engines – and individual overhead): | | | | | |
|---------------------------------|---|---------------|---------------|----------|--------------|---------------|----------|------------------|---------|---------------|--------|-----------|------------|-----------------|-----------------|----------------|--------------|--|---|----------------|------------------|-------------------|-----------------|----|
| | Police Motor units | ALS Ambulance | BLS Ambulance | Engine | Ladder Truck | Bus - 45 Pass | Medic | Animal Cont. Off | Backhoe | EMS Res. Team | Rescue | DPW Sedan | Dump Truck | DPW Light Plant | Structural Eng. | Street Sweeper | Heavy Rescue | | | Police Officer | Medical Examiner | Busses - 20 Passw | Portable Morgue | |
| City of Needland | 33 33 | 16 32 | 4 8 | 22 88 | 7 28 | | 12 24 | 5 5 | 7 7 | 3 45 | | 4 4 | 5 5 | 11 11 | 3 3 | 4 4 | 3 15 | 40 40 | 2 1 | | 1 9 | 19 | 302 | |
| Granger County Fire Department | | | | 15 60 | 7 28 | | | | | | | | | | | | | | | | | | 8 | 96 |
| Arkansas Pass Fire Department | 3 3 | 3 6 | | 3 12 | 2 8 | | 8 8 | | | 3 6 | | | | | | | | 5 5 | | | | | 6 | 54 |
| Boise Fire Department | | | 2 4 | 2 8 | 2 8 | | 6 6 | | | 2 8 | | | | | | | | | | | | | 4 | 38 |
| Calvinton Fire Department | | 2 4 | | 3 12 | 2 8 | | 4 4 | | | | | | | | | | | | | | | | 2 | 30 |
| Columbia State Police | 6 6 | | | | | | | | | | | | | | | | | 7 7 | | | | | 1 | 14 |
| Granger Area Transit Enterprise | | | | | | 18 18 | | | | | | | | | | | | | | 12 12 | | | 3 | 33 |
| Granger County EMS | | 21 42 | 9 18 | | | | 16 16 | | | | | | | | | | | | | | | | 4 | 80 |
| Granger County Sheriff | 12 12 | | | | | | | | | | | | | | | | | 23 23 | | | | | 15 | 50 |
| City of Pleasant Grove | 17 17 | | | 5 20 | 2 8 | | 6 6 | | | 1 4 | | 2 4 | 2 4 | | | | | 11 11 | | | | | 9 | 83 |
| MED STAT | | | | | | | | | | 3 20 | | | | | | | | | | | | | | 30 |
| Port Arkansas | 5 5 | | | | | | | | | | | | | | | | | | | | | | | 5 |
| Taft Police Department | 3 3 | | | | | | | | | | | | | | | | 4 4 | | | | | | | 7 |
| Granger County DPW | | | | | | | | | 4 4 | | | 6 6 | 7 7 | | 8 8 | | | | | | | | 14 | 39 |
| | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | |
| 52. Total Resources | 79 | 42 | 15 | 50 | 22 | 18 | 52 | 5 | 11 | 5 | 6 | 4 | 13 | 20 | 3 | 12 | 3 | 90 | 2 | 12 | 1 | 85 | 861 | |

53. Additional Cooperating and Assisting Organizations Not Listed Above:

