AGENDA ITEM or FINAL CONTRACT REVIEW SUBMITTAL FORM

Agenda Item: American Red Cross Shelter Agreement; Fred R. Fiel

Action Requested: County Manager Signature

Parties to the Agreement: American Red Cross Western Colorado Chapter and Gunnison County

Term Begins: September 1, 2015 **Term Ends:** **Grant Contract #:**

Summary:

This agreement formalizes an arrangement that has been in place for many years, but to my knowledge there has not been a written agreement.

Fiscal Impact: Red Cross will pay for items in agreemet

Submitted by: Marlene D. Crosby **Submitter's Email Address:** mcrosby@gunnisoncounty.org

Finance Review: ○ Required ◉ Not Required

Comments:

Reviewed by: Discharge Date:

County Attorney Review: ◉ Required ○ Not Required

Comments:
ok db 9/4/15

Reveiwed by: GUNCOUNTY1\dBaumgarten Discharge Date: 9/4/2015 Certificate of Insurance Required

Yes ○ No ◉

County Manager Review:

Comments:

Reveiwed by: GUNCOUNTY1\mbirnie Discharge Date: 9/10/2015

○ Consent Agenda ◉ Regular Agenda ○ Worksession Time Allotted: DCM Report

Agenda Date: 9/15/2015

Revised April 2015

American Red Cross
Shelter Agreement

The American National Red Cross ("Red Cross"), a not-for-profit corporation chartered by the United States Congress, provides services to individuals, families and communities when disaster strikes. The disaster relief activities of the Red Cross are made possible by the American public, as the organization is supported by private donations and facility owners who permit their buildings to be used as a temporary refuge for disaster victims. This agreement is between the Red Cross and a facility owner ("Owner") so the Red Cross can use the facility as an emergency shelter during a disaster.

DR#: _____ Facility: FRED R FIELD WESTERN HERITAGE CENTER

Parties and Facility

Owner:

Legal name: GUNNISON COUNTY, COLORADO
Chapter: —
24-Hour Point of Contact:
Name and title: MELODY ROPER FAIRGROUNDS MANAGER
Work phone: 970 641 8561 Cell phone/pager: 970 275 2087
Address for Legal Notices:
275 SOUTH SPRUCE STREET
GUNNISON CO 81230

Red Cross:

Legal name: The American National Red Cross
Chapter: Western Colorado
24-Hour Point of Contact:
Name and title: Duty Officer On Call
Work phone: 303.722.7474 Cell phone/pager: 800.417.0495
Address for Legal Notices:
The American Red Cross
444 Sherman St.
Denver, CO 80203

Copies of legal notices must also be sent to:
The American National Red Cross, Office of the General Counsel,
2025 E Street, NW, Washington DC 20006
and
The American National Red Cross, Disaster Operations,
2025 E Street NW, Washington, DC 20006.

Shelter Facility:

(Insert name and complete street address of building or, if multiple buildings, write "See attached Facility List" and attach Facility List including complete street address of each building that is part of this Agreement).

FRED R FIELD WESTERN HERITAGE CENTER

Terms and Conditions

1. Use of Facility: Upon request and if feasible, the Owner will permit the Red Cross to use the Facility on a temporary basis as an emergency public shelter.

2. Shelter Management: The Red Cross will have primary responsibility for the operation of the shelter and will designate a Red Cross official, the Shelter Manager, to manage the sheltering activities. The Owner will designate a Facility Coordinator to coordinate with the Shelter Manager regarding the use of the Facility by the Red Cross.

3. Condition of Facility: The Facility Coordinator and Shelter Manager (or designee) will jointly conduct a pre-occupancy survey of the Facility before it is turned over to the Red Cross. They will use the first page of the *Facility/Shelter Opening/Closing Form*, available on CrossNet, to record any existing damage or conditions. The Facility Coordinator will identify and secure all equipment that the Red Cross should not use while sheltering in the Facility. The Red Cross will exercise reasonable care while using the Facility as a shelter and will make no modifications to the Facility without the express written approval of the Owner.

4. Food Services: Upon request by the Red Cross, and if such resources exist and are available, the Owner will make the food service resources of the Facility, including food, supplies, equipment and food service workers, available to feed the shelter occupants. The Facility Coordinator will designate a Food Service Manager to coordinate the provision of meals at the direction of and in cooperation with the Shelter Manager. The Food Service Manager will establish a feeding schedule, determine food service inventory and needs, and supervise meal planning and preparation. The Food Service Manager and Shelter Manager will jointly conduct a pre-occupancy inventory of the food and food service supplies in the Facility before it is turned over to the Red Cross.

5. Custodial Services: Upon request by the Red Cross and if such resources exist and are available, the Owner will make its custodial resources, including supplies and custodial workers, available to provide cleaning and sanitation services at the shelter. The Facility Coordinator will designate a Facility Custodian to coordinate the provision of cleaning and sanitation services at the direction of and in cooperation with the Shelter Manager.

6. Security: In coordination with the Facility Coordinator; the Shelter Manager, as he or she deems necessary and appropriate, will coordinate with law enforcement regarding any public safety issues at the Shelter.

7. Signage and Publicity: The Red Cross may post signs identifying the shelter as a Red Cross shelter in locations approved by the Facility Coordinator and will remove such signs when the shelter is closed. The Owner will not issue press releases or other publicity concerning the shelter without the express written consent of the Shelter Manager. The Owner will refer all media questions about the shelter to the Shelter Manager.

8. Closing the Shelter: The Red Cross will notify the Owner or Facility Coordinator of the closing date for the shelter. Before the Red Cross vacates the Facility, the Shelter Manager and Facility Coordinator will jointly conduct a post-occupancy survey, using the second page of the Shelter/Facility Opening/Closing Form to record any damage or conditions. The Shelter Manager and Facility Coordinator or Food Service Manager will conduct a post-occupancy inventory of the food and supplies used during the shelter operation.

9. Reimbursement: The Red Cross will reimburse the Owner for the following:

   a. *Damage to the Facility or other property of Owner*, reasonable wear and tear excepted, resulting from the operations of the Red Cross. Reimbursement for facility damage will be based on replacement at actual cash value. The Red Cross will select from among bids from at least three

reputable contractors. The Red Cross is not responsible for storm damage or other damage caused by the disaster.

b. *Reasonable costs associated with custodial and food service personnel* which would not have been incurred but for the Red Cross's use of the Facility for sheltering. The Red Cross will reimburse at per-hour, straight-time rate for wages actually incurred but will not reimburse for (i) overtime or (ii) costs of salaried staff.

c. *Reasonable, actual, out-of-pocket operational costs*, including the costs of the utilities indicated below, to the extent that such costs would not have been incurred but for the Red Cross's use of the Premises (both parties must initial all utilities to be reimbursed by the Red Cross):

	Owner initials	Red Cross initials
Water		
Gas		
Electricity		
Waste Disposal		

The Owner will submit any request for reimbursement to the Red Cross within 60 days after the shelter closes. Any request for reimbursement for food, supplies or operational costs must be accompanied by supporting invoices. Any request for reimbursement for personnel costs must be accompanied by a list of the personnel with the dates and hours worked at the shelter.

10. Insurance: The Red Cross shall carry insurance coverage in the amounts of at least $1,000,000 per occurrence for Commercial General Liability and Automobile Liability. The Red Cross shall also carry Workers' Compensation coverage with statutory limits for the jurisdiction within which the facility is located and $1,000,000 in Employers' Liability.

11. Indemnification: The Red Cross shall defend, hold harmless, and indemnify Owner against any legal liability, including reasonable attorney fees, in respect to bodily injury, death and property damage arising from the negligence of the Red Cross during the use of the Premises.

12. Term: The term of this agreement begins on the date of the last signature below and ends 30 days after written notice by either party.

Owner (legal name)	THE AMERICAN NATIONAL RED CROSS (legal name)
By (signature)	By (signature)
Name (printed)	Name (printed) PHIL & LINDA SMITH
Title	Title VOLUNTEERS
Date	Date 8-15-2015

American Red Cross

Shelter Facility Survey

BASIC SHELTER INFORMATION

Site Name/ School District Gunnison County **NSS ID#** _____ **Date** 8/15/15

Name of building Fred R. Field Western Heritage Center **Building #** 1 **of** 1

Phone # 970) 641-8561 **Fax #** 970) 641-4687 **Website** _____

Shelter address 275 South Spruce Street

Town/ City Gunnison **County/ Parish** Gunnison **State** CO **Zip Code** 81230

Mailing Address (*if different*) Same as Above

Town/ City _____ **County/ Parish** _____ **State** _____ **Zip Code** _____

Agency operating shelter (*check one*) ☒ Red Cross ☐ FEMA ☐ DHS ☐ TSA ☐ SBC ☐ Other _____

Shelter agency type (*check one*) ☒ Red Cross managed ☐ Red Cross partner ☐ Red Cross supported ☐ Independent _____

Shelter type (*check all that apply*) ☒ Evacuation ☒ General ☐ Medical ☐ Other _____

General facility notes GREAT FACILITY, CENTRALLY LOCATED, WELL MANAGED, CLEAN, QUITE VERSITILE AS A DISASTER SHELTER.

Shelter Capacity

Use the calculations to calculate the capacity for sleeping space.

Total sq feet 23440

☐ **Evacuation** 9600 usable sq ft ÷ 20 sq ft/person = 480 person capacity

☐ **Post Impact** 16222 usable sq ft ÷ 40 sq ft/person = 170+ person capacity

Sq feet usable for sleeping space _____

☐ **Other** _____ usable sq ft ÷ ____ sq ft/person = _____ person capacity

Geographic Information

Use major landmarks (e.g. highways, intersections, rivers, railroad crossings, etc.) that will be easily recognizable in a disaster. Latitude and longitude coordinates can be found at online web sites, using a global positioning system device, or will auto populate when the address is entered into the National Shelter System.

Latitude 38° 32' 29.60" N **Longitude** 106° 55' 51.55" W **Elevation** 7694

In storm surge/ evacuation ☐ Yes **Hurricane category or evacuation area** _____ ☒ No

In flood plain ☐ Yes _____ **year flood impact** ☒ No

Directions to facility From Hwy 50 turn South on Spruce Street, 2 Blocks to Fairground entrance. Fred Field Western Heritage Center is largest building on right. Parking in front and behind Center

American Red Cross

Shelter Facility Survey

Point of Contact to *Authorize Use* of Facility

Name Melody Roper Title Facility Manager Phone # 970) 641-8561

24 hour # 970) 275-2087 Fax # 970) 641-4687 Email mroper at gunnisoncounty.org

Contact notes Home phone: 970) 641-0267

Point of Contact to *Open* Facility

Name Melody Roper Title Facility Manager Phone # 970) 641-8561

24 hour # 970) 275-2087 Fax # 970) 641-4687 Email mroper at gunnisoncounty.org

Contact notes after hours home phone: 970) 641-0267

Alternate Point of Contact

Name Stan Faulds Title Asst. Facility Manager Phone #

24 hour # 970) 596-2524 Fax # Email

Contact notes

Pet Shelter

Pet shelter space available on site ☒ Yes *answer questions below* ☐ No nearest location

Separate ventilation system ☒ Yes ☐ No | Cement or tile floors with drains ☒ Yes ☒ No | Outdoor space to relieve pets ☒ Yes ☐ No

Agency that will operate the pet shelter Fairgrounds Phone # See Melody 24 hour # See Melody

ADDITIONAL INFORMATION

Shelter agreement signed ☒ Yes ☐ No Date signed 8-17-2015 Notes

Pre-designated shelter team assigned ☐ Yes Team name ☒ No

Current facility floor plans available ☒ Yes Location of copies In File, Red Cross Office ☐ No

International Association of Venue Managers (IAVM) facility ☐ Yes ☒ No

Use the Standards for Selection of Hurricane Evacuation Shelters to select hurricane evacuation shelters. In this document, you will find a planning process that involves many factors (e.g. technical information for storm surge and flood mapping). This process requires close coordination with local officials for technical information to make decisions about hurricane shelter suitability. Use the Facility Construction section to assist with determining whether this can be a hurricane evacuation shelter.

Shelter can be a hurricane evacuation shelter ☐ Yes ☒ No Notes

American Red Cross

Shelter Facility Survey

Survey Conductors (*List all who participated in the survey*)

Name	Title	Organization	Phone #
Phillip C. Smith	Volunteer	Red Cross	970) 243-5456
Linda Smith	Volunteer	Red Cross	970) 216-6804

LIMITATIONS OF FACILITY USE

Check one ☒ This facility will be available for use at any time during the year ☐ This facility is only available for use during the time periods listed below ☒ This facility is not available for use during the time periods listed below

	Dates (*mm/dd/yyyy*)	Times (*hh:mm*)			Dates (*mm/dd/yyyy*)	Times (*hh:mm*)	
From			☐ AM ☐ PM	**From**	SEE NOTES PAGE 7-8		☐ AM ☐ PM
To			☐ AM ☐ PM	**To**			☐ AM ☐ PM

List any recurring dates that the facility is not available (*e.g. every sunday*) County Fair normally 2nd weekend of July.

Areas of the facility that are restricted during use Private Offices and County Storage, 4H areas. See map layout

FACILITY CONSTRUCTION & SAFETY

Facility Construction

Construction material ☒ Wood ☒ Masonry/Brick ☐ Pre-fab ☐ Bungalow ☒ Concrete ☒ Metal ☐ Trailer ☐ Pod ☐ Other Horse Stalls + Cattle area are Shelter w/dirt Floors

 # stories/ floors 2 **Notes** 2nd Story for Staff, Loft area open to eating area

Elevator ☐ Yes **Location** ☒ No **Notes**

Open roof-spans (see Standards for Selection of Hurricane Evacuation Shelters for current standards) ☐ Yes **Length** ☐ No

Windows in sleep area ☐ Yes ☒ No **If yes, shatter protected** ☐ Yes ☐ No **If yes, protected with shutter** ☐ Yes ☒ No

Fire & AED Safety

Some facilities may not meet fire codes based on building capacity. The questions below are a general reference. Contact your local fire department with questions or for more information.

Fire alarms & systems (*check all that apply*) ☒ Working smoke detectors ☒ Inspected fire alarm system ☒ Functional sprinkler system ☒ Functional direct fire department alert

Comments from fire department

AED(s) on site ☐ Yes **Location** ☒ No

American Red Cross

Shelter Facility Survey

Facility Inspection Point of Contact

If requested, who would inspect this facility post-impact to determine it is safe to occupy?

Name Melody Roper **Title** Facility Manager **Phone #** 970) 641-8561

24 hour # 970) 275-2087 **Fax #** 970) 641-4687 **Email** mroper at gunnisoncounty.org

Contact notes after hours home phone: 641-0267

SANITATION, FEEDING & UTILITIES

Sanitation, Utilities & Power

The recommended ratio for toilet facilities is a minimum of 1 toilet for 20 people. The optimum scenario for showers is 1 shower for every 25 residents. Count all facilities that will be available to shelter residents and staff.

Showers available ☒ Yes **# of showers** 6 ☐ No | **Toilets available** ☒ Yes **# of toilets** 16 ☐ No

Check all that apply **Heating** ☐ Electric ☒ Natural Gas ☐ Propane ☐ Fuel Oil | **Cooling** ☐ Electric ☐ Natural Gas ☐ Propane

Check all that apply **Cooking** ☐ Electric ☒ Natural Gas ☐ Propane | **Water** ☐ Municipal ☐ Well(s) ☐ Trapped

Self-sufficient power ☒ Yes **Type** Solar Hot Water ☐ No

Note fuel requirements, generator capacity, facility areas supported by generator(s), and other relevant information.

Emergency generator on site ☒ Yes ☐ No **Notes** Several M/W Toilets and Showers both inside the Heritage Center and adjacent building.

Feeding

Food Prep (*check all that apply*) ☒ Warming oven kitchen ☐ Full service ☐ Central kitchen (delivery)

Food stock stored on site ☐ Yes **# meal can be served** ____ ☒ No | **Refrigeration units on site** ☒ Yes **# units** 1 Lg Ref/Freezer 1 Sm Freezer ☐ No

Seating capacity ☒ Cafeteria X ☐ Snack Bar ____ ☐ Other indoor seating ____ **Total estimated seating capacity for eating** 700

Notes on feeding Kitchen w/ Outside entrance can accommodate large Catering. Kitchen access to either of the large rooms.

ACCESSIBILITY

See accompanying Shelter Facility Survey-Accessibility Instructions.

Facility Construction Facility built in 1993 or later, or extensively altered in 1992 or later. ☐ Yes ☒ No

Parking Areas Parking available. ☒ Yes ☐ No

Answer below if parking is available

Accessible parking space(s) ☒ Yes ☐ No **Notes** Parking at entrance to

Van accessible parking space(s) ☒ Yes ☐ No **Notes** Heritage Ctr. plus Huge Lot Behin

Drop-off/ Loading Area Permanent drop-off area/loading zone with marked access aisle or space available to designate as temporary drop-off area/loading zone. ☒ Yes ☐ No

Facility Entrance	Sidewalk connects parking area and any drop-off area to at least one facility entrance.	☒ Yes	☐ No
	Route from accessible parking spaces and any drop-off area/loading zone to at least one facility entrance has no steps or curbs without curb cuts.	☒ Yes	☐ No
	Where route crosses curb, curb cuts are at least 36" wide.	☒ Yes	☐ No
	Automatic doors or doors without knob hardware.	☒ Yes	☐ No
	Doorways at least 32" wide when door is open.	☒ Yes	☐ No
	Level landings on interior and exterior sides of entry door.	☒ Yes	☐ No
	No objects protrude from the side more than four inches into the route to the facility entrance.	☒ Yes	☐ No
	If the main facility entrance does not appear to be accessible, another entry is accessible.	☒ Yes	☐ No
	A sign identifies the location of the accessible entrance.	☒ Yes	☐ No
Routes to Service Delivery Areas	A route without steps is available to access each service delivery area, as well as restrooms and showers or service can be provided in area that can be accessed by route with no steps.	☒ Yes	☐ No
	Using a yard stick held horizontally at your waist level, walk from the facility entrance to each service delivery area, as well as restrooms and showers. Except at doorways (which must be only 32" wide), no part of the route is less than 36" wide.	☒ Yes	☐ No
	Route has vertical clearance of at least 80".	☒ Yes	☐ No
	No objects protrude from the side more than 4" into the routes to the various service delivery areas.	☒ Yes	☐ No
	Automatic doors or doors without knob hardware.	☒ Yes	☐ No
	Doorways at least 32" wide when door is open along routes to each service.	☒ Yes	☐ No
	If a service delivery area is accessible only by elevator, there is back-up power for the elevator(s). N/A	☐ Yes	☐ No
Ramps	Ramps are at least 36" wide, have handrails on both sides 34"-38" above the ramp surface, and have level landings at least 60" long.	☒ Yes	☐ No
	If yes, type of ramp ☒ Fixed ☐ Portable	☐ Not provided	
	If ramps are longer than 30 feet, a level landing at least 60" long is provided every 30 feet. N/A	☐ Yes	☐ No
Restrooms	Area where person in a wheelchair can turn around (60-inch diameter circle or T-shape turn area).	☒ Yes	☐ No
	Doorways at least 32" wide when door is open.	☒ Yes	☐ No
	Doors without knob hardware.	☒ Yes	☐ No
	Toilet seat is 17"-19" high. Flush control is automatic or manual control on the open side of the toilet and no higher than 48".	☒ Yes	☐ No
	Toilet's centerline is 16"-18" from the nearest side wall.	☒ Yes	☐ No
	Stall at least 60" wide and 56" deep (wall-mounted toilet) or 59" deep for (floor mounted toilet).	☒ Yes	☐ No
	Space at least 9" high is provided beneath the front and one side of the stall.	☒ Yes	☐ No
	Appropriate grab bars.	☒ Yes	☐ No
	Toilet paper dispenser is within 36" of the rear wall.	☒ Yes	☐ No
	At least one accessible sink.	☒ Yes	☐ No

Showers

Showers available. ☒ Yes ☐ No

Answer below if showers are available

At least one accessible shower stall with appropriate grab bars. ☒ Yes ☐ No

Stall type ☐ Transfer stall ☒ Roll-in shower ☐ Not provided

Shower seat 17"-19" high. If in transfer stall, seat is on the wall opposite the shower controls. If in roll-in shower, seat is on wall adjacent to the shower controls. ☒ Yes ☐ No

Hand-held shower spray with ability to mount at 48" (typically via a mount that can be adjusted along a fixed vertical bar), or alternatively a fixed shower head at 48". ☒ Yes ☐ No

Controls do not require tight grasping, pinching or twisting and are mounted 38"-48" high and no more than 18" from the front of the shower. ☒ Yes ☐ No

Eating areas

At least some tables have tops 28"-34" high and space underneath at least 27" high, 30" wide and 19" deep. ☒ Yes ☐ No

Serving line or counter no higher than 34". Buffet Style ☒ Yes ☐ No

Assessment

Relevant areas of the facility are accessible to people with disabilities without adjustments. ☒ Yes ☐ No

Facility has at least one accessible entrance and one accessible restroom, and otherwise is capable of being made accessible during a disaster with minor adjustments. ☒ Yes ☐ No

Facility would require extensive adjustments to be accessible during a disaster. ☐ Yes ☒ No

Adjustments for Accessibility (*Identify any adjustments or enhancements that should be made to make the relevant areas of the facility accessible during a disaster*) All areas are handicap Accessible, except 2nd Floor loft which could be used for Red Cross Staff area. Isolated Care or Sleeping Could be accomplished in Conference Room.

OTHER CONSIDERATIONS

Additional Facilities & Space

Isolated care areas ☒ Yes ☐ No **Type of area** ☒ Rooms ☐ Shelter area ☐ Separate facility/area | **Shelter registration area** ☒ Yes ☐ No

Laundry facilities ☐ Yes ☒ No **# of washers** _____ **# of dryers** _____ **Who can access the laundry facilities** ☐ Shelter workers ☐ Shelter residents

Special conditions or restrictions for laundry _____

Available Materials

One cot and two blankets per shelter resident is recommended. Note all available materials for shelter use in the notes section.

Cots available ☐ Yes **# of cots** _____ ☒ No **Location** _____

Blankets available ☐ Yes **# of blankets** _____ ☒ No **Location** _____

Children's supplies (*e.g. cribs & changing table*) ☐ Yes ☒ No | **Chairs & tables available** ☒ Yes **# of chairs** 700 **# of tables** 18 Long 4 Round ☐ No

Notes Facility is set up for large Scale Banquets

American Red Cross

Shelter Facility Survey

Facility Ownership & Proximity Considerations

Does the entity that plans to manage the shelter own the building? ☒ Yes ☐ No

If no, is there a current written plan? ☐ Yes ☐ No

Is this facility within five miles of an evacuation route? ☒ Yes ☐ No

Is this facility within ten miles of a nuclear power plant? ☐ Yes ☒ No

Groups Associated with the Facility & Training

Facility staff required when using facility? ☐ Yes ☒ No

Paid feeding staff required when using facility? ☐ Yes ☒ No

Church auxiliary required when using facility? ☐ Yes ☒ No

Fire auxiliary required when using facility? ☐ Yes ☒ No

Other required? ☒ Yes ☐ No **Other** Catering or Volunteer for Feeding

Will any of the above groups be trained or experienced in Red Cross shelter operations or support? ☐ Yes ☒ No

If yes, describe capabilities

Has the facility been trained in Red Cross sheltering (if not Red Cross managed)? ☐ Yes ☒ No

If yes, describe capabilities

Training requested by facility or group ☐ Yes **# of staff to be trained** _____ ☒ No

ADDITIONAL NOTES & INFORMATION

Large Banquet, multipurpose Facility w/ Two Large group areas with Kitchen entrance to either room. Larger of the rooms has padded in-floor heating Floors. Smaller room adjacent, Conference room is large w/ plenty of power for handicap. Restrooms and Showers on either end of Large rooms. Well laid out Kitchen w/ Supplies, Commercial Stove and Refrigerator/Freezer, and outside entrance for Catering. Building adjacent has multi Showers and toilets, some handicap. Large Corral areas for livestock on premise. Covered pet Care adjacent to Heritage Center - no cages. Pet Care and Cages from Gunnison County Animal Welfare League, 970) 641-1173. Great facility for Rural population with livestock. Clean, well-maintained and Managed Facility w/accommodating Staff.

ADDITIONAL NOTES & INFORMATION continued

THIS IS AN IDEAL FACILITY FOR RED CROSS DISASTER SHELTER NEEDS, ESPECIALLY IF VICTIMS HAVE MANY PETS AND FARM ANIMALS. CENTRALLY LOCATED, WELL KNOWN WITH LARGE EXPANCES FOR JUST ABOUT ANYTHING. LARGE ENOUGH TO HANDLE QUITE A FEW FOLKS BUT CONVENIENT ACCESS TO THE FACILITY FROM NUMEROUS POINTS.

USE OF THIS FACILITY TO BE COORDINATED GUNNISON COUNTY EMERGENCY MANAGER, GUNNISON SCHOOLS, GUNNISON PARKS & REC CENTER, WESTERN STATE COLORADO UNIVERSITY AND OTHER FACILITIES TO DETERMINE BEST LOCATION IN THE EVENT OF A DISASTER

OFFICE USE ONLY (Do not fill out this section during survey)

Chapter Category / Priority of Use: Designated by chapter leadership after the survey is completed.

This is a primary shelter for (*check one*) ☐ General population ☐ Evacuation Center

Shelter cannot be used for (*check all that apply*) ☐ General population ☐ Evacuation Center

This is a priority shelter for the following events (*check all that apply*) ☐ Hurricane ☐ Earthquake ☐ Large Scale Fire / Flood / _____