Municipal Road Condition Tracking

MUNICIPALITY: _____

INCIDENT: _____ **DATE & TIME:** _____

COMPLETED BY: _____

CONTACT: _____ **CONTACT PHONE**: _____

Road Name (include block, cross street, or intersection)	Status	Condition	Est. Reopen
	☐Open ☐Closed ☐Emergency Travel Only ☐One-lane Only	☐Impassable ☐Damaged ☐Destroyed	☐2-4 hours ☐4-6 hours ☐>6 hours ☐unknown ☐>12 hours
	☐Open ☐Closed ☐Emergency Travel Only ☐One-lane Only	☐Impassable ☐Damaged ☐Destroyed	☐2-4 hours ☐4-6 hours ☐>6 hours ☐unknown ☐>12 hours
	☐Open ☐Closed ☐Emergency Travel Only ☐One-lane Only	☐Impassable ☐Damaged ☐Destroyed	☐2-4 hours ☐4-6 hours ☐>6 hours ☐unknown ☐>12 hours
	☐Open ☐Closed ☐Emergency Travel Only ☐One-lane Only	☐Impassable ☐Damaged ☐Destroyed	☐2-4 hours ☐4-6 hours ☐>6 hours ☐unknown ☐>12 hours
	☐Open ☐Closed ☐Emergency Travel Only ☐One-lane Only	☐Impassable ☐Damaged ☐Destroyed	☐2-4 hours ☐4-6 hours ☐>6 hours ☐unknown ☐>12 hours
	☐Open ☐Closed ☐Emergency Travel Only ☐One-lane Only	☐Impassable ☐Damaged ☐Destroyed	☐2-4 hours ☐4-6 hours ☐>6 hours ☐unknown ☐>12 hours
	☐Open ☐Closed ☐Emergency Travel Only ☐One-lane Only	☐Impassable ☐Damaged ☐Destroyed	☐2-4 hours ☐4-6 hours ☐>6 hours ☐unknown ☐>12 hours
	☐Open ☐Closed ☐Emergency Travel Only ☐One-lane Only	☐Impassable ☐Damaged ☐Destroyed	☐2-4 hours ☐4-6 hours ☐>6 hours ☐unknown ☐>12 hours
	☐Open ☐Closed ☐Emergency Travel Only ☐One-lane Only	☐Impassable ☐Damaged ☐Destroyed	☐2-4 hours ☐4-6 hours ☐>6 hours ☐unknown ☐>12 hours

Do any of the affected roadways possess: ☐ **Critical Infrastructure** ☐ **Isolated Residents** ☐ **Special Populations**

If so, which ones? _____

Send completed form to: dutyofficer@ycdes.org