

Damage Assessment Form – Sheet 1

Immovable Cultural Heritage | *to be filled on-site*

General Instructions

A form for screening and quick visual damage assessment for individual heritage buildings. For a site containing multiple buildings, use separate forms. As a good practice, give a common reference number to each of those forms.

Data recorded in this form will help to identify severe to moderate physical damage, assess immediate risks that could further increase the damage and define immediate measures that can be taken at a site to secure and stabilize the heritage.

Analysis of the data gathered in this form will help to estimate the time required, costs, as well as human resources needed for cultural heritage first aid operations.





This assessment will also help in building an overall view of the priorities, for individual heritage sites/institutions as well as overall priorities for first aid recovery.

Before going to the site, if possible, collect previous documentation, such as a site map, a building floor plan(s), elevation drawings, pre-event photos.

E	Administrative Information	
E.1	Form number	
E.2	Date of assessment	
E.3	Contact person on the site (Name, email and phone number)	
E.4	Geo-coordinates of the heritage site (if the site is located at a height, please describe how to reach it)	

E.5	Site context	<input type="checkbox"/> Village/Town <input type="checkbox"/> Countryside <input type="checkbox"/> Urban area <input type="checkbox"/> Industrial area <input type="checkbox"/> Other:
E.6	Number of buildings on the site	
E.7	Owner of the site/building	<input type="checkbox"/> Government <input type="checkbox"/> Private <input type="checkbox"/> Other:
E.8	What was the primary use of the building?	<input type="checkbox"/> Religious <input type="checkbox"/> Archive <input type="checkbox"/> Library <input type="checkbox"/> Museum <input type="checkbox"/> Archaeological <input type="checkbox"/> Residential <input type="checkbox"/> Theatre <input type="checkbox"/> Governmental <input type="checkbox"/> Hospital <input type="checkbox"/> Educational (school, university) <input type="checkbox"/> Other:
E.9	Number of floors/storeys	

Overall Site Access and Damage to the Building		
E.10	Primary source of damage	<input type="checkbox"/> Bomb and bomb induced fire <input type="checkbox"/> Artillery shelling <input type="checkbox"/> Missile strike <input type="checkbox"/> Extreme physical forces <input type="checkbox"/> Other:
E.11	Evaluate site access considering existing routes.	<input type="checkbox"/> Many routes <input type="checkbox"/> Two routes <input type="checkbox"/> Dead-end street <input type="checkbox"/> Only pedestrians <input type="checkbox"/> Other:
	Also explain if these routes are open and not blocked in any way (<i>Mark the functional access roads on the site map</i>):	
E.12	Is there a parking space available for medium to heavy vehicles?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	If yes, how many vehicles can be parked in or around the site/building?	
E.13	Do you see any explosives and their remnants around the site and/or blocking the access to the building(s) to be assessed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
E.14	Do you see debris which is not part of the heritage site strewn around or blocking the access to the building?	<input type="checkbox"/> Yes <input type="checkbox"/> No

E.15	Area(s) that can be inspected	<input type="checkbox"/> Exterior only <input type="checkbox"/> Exterior and interior <input type="checkbox"/> Other:
E.16	Number of building entry and exit points <i>(Mark also with photo references)</i>	
E.17	Specify which entry and exit points can be used <i>(Mark the functional entry and exit points on the site map/building floor plan)</i>	
E.18	Building characteristics	<input type="checkbox"/> Stand-alone  <input type="checkbox"/> Part of a cluster  <input type="checkbox"/> Shared wall with another structure  <input type="checkbox"/> Corner building 
E.19	<i>Please take a photo of the building. Mark its location on the site map or a building floor plan, if available, as Photo number 1. See instructions on how to make a site map or a building floor plan.</i>	

E.20	Material and construction system	<input type="checkbox"/> Stone masonry (load bearing) <input type="checkbox"/> Brick masonry (load bearing) <input type="checkbox"/> Reinforced concrete (column and beams) <input type="checkbox"/> Unreinforced concrete block masonry <input type="checkbox"/> Wooden construction <input type="checkbox"/> Steel structures <input type="checkbox"/> Other:
E.21	Number of floors/storeys	
If it is a multi-storey building, list the floors that you can safely access (e.g. first floor, second floor, terrace, etc.):		
E.22	Which of the building utilities are available and functional?	<input type="checkbox"/> Water <input type="checkbox"/> Gas <input type="checkbox"/> Electricity
E.23	What is the overall degree of damage to the building	<input type="checkbox"/> Severe (heavy structural damage, very heavy non-structural damage) <input type="checkbox"/> Moderate (moderate structural damage, heavy non-structural damage) <input type="checkbox"/> Minor (slight structural damage, moderate non-structural damage) <input type="checkbox"/> Destruction (total or near total collapse/damage)
E.24	<i>Please take a photo of the entry and exit points. Mark its location on the site map/floor plan, if available, as Photo number 3.</i>	

E.25	Type of damage to the building				<input type="checkbox"/> Structural <input type="checkbox"/> Non-structural
E.26	Damage observed to the building (Structural and non-structural)				
Building element	Damage	Severe (heavy structural damage, very heavy non-structural damage)	Moderate (moderate structural damage, heavy non-structural damage)	Minor (slight structural damage, moderate non-structural damage)	Destruction (total or near total collapse/ damage)
Structural Elements					
Foundation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wall	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Roof	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Columns or load bearing walls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Beams	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Framing or connection elements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Structural facade bracings (if visible)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Roof vault or truss and bracing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Floor slabs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Domes (<i>if any</i>)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Buttresses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other structural elements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Non-structural elements				
Overhanging elements (e.g. overhanging balconies)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Spires/ pinnacles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bell Tower	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parapets and lintels	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cladding and glazing materials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Frescoes and wall paintings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Doors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Windows	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Staircase	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Partition walls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Historical floor tiles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Decorative elements (<i>false ceilings, wall paintings, mouldings, light fixtures etc.</i>)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Showcases/ shelves	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Plumbing fixtures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electrical fixtures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other non-structural elements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Others:				
E.27	<i>Please take a photo of the damage to the elements, especially if marker severe – e.g. exposed structural elements, broken fixtures, large cracks, etc. Mark its location on the site map/floor plan, if available, as Photo number 4.</i>			
E.28	Are there any secondary risks to be considered?			
	Fire <input type="checkbox"/> Fire due to exposed wiring/flammable materials <input type="checkbox"/> Fire due to exposed gas pipes	Localized flooding <input type="checkbox"/> Roof collapse and flooding <input type="checkbox"/> Pipe burst and localized flooding <input type="checkbox"/> Leakage/ water seepage	Vandalism <input type="checkbox"/> Vandalism and looting <input type="checkbox"/> Signs of intentional destruction <input type="checkbox"/> Deliberate or indiscriminate bombing	

	Physical damage <input type="checkbox"/> Shattered glass/shards <input type="checkbox"/> Partial building collapse <input type="checkbox"/> Full building collapse <input type="checkbox"/> Landslides/fissures	Hazardous material and waste: <input type="checkbox"/> Chemicals and toxic materials/fumes <input type="checkbox"/> Pollutants <input type="checkbox"/> Other:	Other hazards (list and explain)
E.29	List the immediate risks and corresponding actions that need to be taken in order to secure and stabilise the building. If possible, also provide indicative costs for the actions, in consultation with local experts.	<input type="checkbox"/> Removable of debris <input type="checkbox"/> Safe removal of unexploded ordinances <input type="checkbox"/> Emergency structural stabilization <input type="checkbox"/> Emergency non-structural stabilization <input type="checkbox"/> Salvage of heritage building fragments/parts <input type="checkbox"/> Evacuation to another safe storage <input type="checkbox"/> Securing the site against future attack <input type="checkbox"/> Guard needed <input type="checkbox"/> Other:	
	Notes:		

