Grama Niladhari Level Incident Reporting Format

Instructions:

After an incident within one day fill this form and send to Divisional Secretariat. Update the form and send again as appropriate

Date	District	
Division	GN Division	
Event	Location of incident	
Cause		

A. Reporting on the Impact of Disaster

Dead	Injured	Hospitalized	Missing	No of IDP camps

In the	e IDP camp	Evac	uated	Affected	
No of People No of Families		No of People	No of Families	No of People	No of Families

No. of houses damaged		No of bridge damage		No of culverts damaged		No. of	No. of shops / business	No. of government
Partially	Fully	Partially	Fully	Partially	Fully	Roads damaged	premises damaged	premises damaged

Paddy farms		Other farms		Livestock	Fisheries (No of)	
No. of families	Land – ha	No. of families	Land – ha	No. of families	Vessels damaged	Families affected

B. Request for Relief

Requested amount for relief distribution (Indicate amount in relevant place - Rs)						
Dry rations	tions Cooking meals					
Other emergency supplies		Loss of life				
Partially damaged houses		Fully damaged houses				
Loss of crop		Loss of livestock				

Prepared by	Name :	Approved by	Name :
	Signature:		Signature: