FACILITY NEEDS ASSESSMENT WORKSHEET ICS-235-CG (Rev 12/11)		4. Requiremen	# Expected Personnel	Internal/Building Workspace Sq Ft (80 sq ft/pers)	Wall Space Linear Sq Ft	Multi-Purpose Mtg Rm Sq Ft (20 sq ft/pers + display space)	External/Outside Laydown Sq Ft	Parking Space Sq Ft (120 sq ft/vehicle x 1.4 circulation factor)	te Control (HVAC)	Toilet Rooms	Work Tables	Conf Table	S	Telephones	Speaker Phone	Fax Machines	Power Outlets	Comp Workstations	ırs	Chart Printer/ChartPro	Video Projectors	Copy Machines	Paper Shredders			
2. LOCATION	3. FACILITIES	t s	# Exp	Interr Works ft/pers	Wall S	Multi-Pi Ft (20 s space)	Exterr Sq Ft	Parkir sq ft/v circula	Clima neede	Toilet	Work	Conf -	Chairs	Telep	Speak	Fax N	Powe	Comp	Printers	Chart	Video	Copy	Paper			
ICP	Unified Command	REQ									-															
	Liaison Officer & Agency Reps	REQ																								
	Safety Officer	REQ																								
	Public Information Officer	REQ																								
	Planning Section	REQ																								
	Operations Section	REQ																								
	Logistics Section	REQ																								
	Finance/Admin Section	REQ																								
	Common Areas	REQ																								
Base	Base	REQ																								
		REQ																								
JIC	JIC	REQ																								
		REQ																								
Staging		REQ																								
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FACILITY NEEDS ASSESSMENT WORKSHEET (ICS-235-CG (rev 12/11))

Instructions for filling out the form

<u>Purpose</u>. The ICS-235 USCG Facility Needs Assessment Worksheet is a planning tool used to develop the Incident Command Post (ICP) Plan in a structured and disciplined manner.

<u>Preparation</u>. The Facility Needs Assessment Worksheet is completed by the Logistics Section Chief but may also be completed by Command and General Staff to help them determine their ICP or other space needs.

<u>Distribution</u>. The Facility Needs Assessment Worksheet is found as page-sized form.

Item # & Title Instructions

1. Incident Name Enter the name assigned to the incident.

2. Location Location (ICP, JIC, etc).

3. Facilities Enter the specific entity being supported (e.g. Unified Command). This is

already filled in for the ICP. There is space to fill in for other facilities or entities that may need to be supported (e.g. Volunteer processing center). For Staging Area – note specific staging area supported (as there may be

more than one).

4. Requirements Fill in the information requested as best as possible. Use open space

beyond Paper Shredders to add additional support requirements, if

needed.

Expected Personnel Expected Number of personnel in the location.

Internal/Building Workspace Enter workspace square feet requirement. Multiply expected number of

personnel by 50 to 80 to get this number.

Wall Space Enter linear wall space requirement in square feet.

Multi-Purpose Meeting Rm

External/Outside Lay down Parking Space

If needed, enter External/Outside Lay down square feet requirement. If needed, enter Parking Space square feet requirement. This would be multiplication of number of parking spaces needed times 120 sq ft per

If needed, enter Multi-Purpose Meeting Rm square feet requirement.

vehicle times 1.4 circulation factor.

Climate Control Enter Yes or No if Climate Control is needed in the building.

Toilet Rooms Enter number of Toilet Rooms/Water Closets required. This is based on

the OSHA requirement for the number of personnel expected to be supported at that facility (see 29CFR1910.141) – 1 to 15 personnel = 1 fixture, 16 to 35 = 2, 36 to 55 = 3, 56 to 80 = 4, 81 to 110 = 5, 111 to 150 = 6, and over 140 personnel one fixture for each additional 40 personnel.

See CFR for more specific information.

Work Tables Enter the number of work tables required. Note dimensions in work table

name block or note dimensions in comments.

Conf Table Enter the number of conference tables, if needed. Note dimensions in

work table name block or note dimensions in comments.

Chairs Enter the number of chairs, if needed.
Telephones Enter the number of telephones required.
Speaker Phone Enter the number of speaker phones, if needed.
Fax Machines Enter the number of fax machines, if needed.
Power Outlets Enter the number of power outlets required.

Comp Workstations Enter the number of computer workstations required.

Printers Enter the number of printers required. Note color or black and white.

Chart Printer/ChartPro Enter the number of Chart Printer/ChartPro, if needed.

Video Projectors Enter the number of Video Projectors, if needed.

Copy Machines Enter the number of copy machines, if needed.

5.. Prepared by Enter the name of the person completing the form, normally the Logistics

Section Chief.

6. Total Enter totals for each support item (if desired).

7.. Date/Time Prepared Enter the date/time prepared.
8. Comments Enter comments as desired.