

# Geotechnical Rapid Assessment Form

This form is not to be used for insurance assessments or purposes other than that intended by the RBA process.  
Fields with asterisks (\*) are mandatory, others are optional.

## ASSESSMENT

**1** This is a Geotechnical Rapid Building Assessment carried out under the authority of:  
 [Territorial Authority]\*

**2** Team ID\*:   
Team Leader name\*:   
Team Leader ID\*:  RBA ID number:

## PROPERTY OR BUILDING IDENTIFICATION

**3** Assessment date\*:  Assessment time\*:  ☐ AM ☐ PM  
(to nearest half hour)

**4** Property or building Identification/name  
Number\*:  Unit\*:   
Street\*:   
City/Town\*:   
GPS (Degree with 5 decimals after comma) South  ,  East  ,   
Other ID or entry location:  Photo taken: ☐ No ☐ Yes

**5** Contact name   
Usual occupant present ☐ Yes ☐ No  
Type: ☐ Owner ☐ Tenant ☐ Other  
Phone:  (with area code)

**6** Existing placard\*: ☐ None ☐ W ☐ Y1 ☐ R1  
☐ Y2 ☐ R2  
Date:  Team ID:  (if provided)

W – White  
Y1 – Parts of building  
Y2 – Short term entry  
R1 – Building structure  
R2 – External hazard



## SITE DESCRIPTION

7

### Structures Present

- ☐ Commercial building  
☐ Residential dwelling  
☐ Accessory buildings (garage, shed)  
☐ Retaining wall  
     ☐ < 1.5m  
     ☐ > 1.5m  
☐ Other

8

### Topographic Setting

- ☐ Flat ground  
☐ Flat ground, adjacent to slope:  
     ☐ Slope above/ below buildings  
     ☐ Slope height (m)   
     ☐ Distance to slope (m)   
☐ Sloping ground:  
     ☐ Gentle < 10 degrees  
     ☐ Moderate 10 to 20 degrees  
     ☐ Steep > 20 degrees

9

### Other relevant features (eg. river, stream, gully)

Describe, including distance to structures

## HAZARD IDENTIFICATION (Factual Information)

10

### Hazards Observed

- |   |  |   |  |
|---|--|---|--|
| <input type="checkbox"/> Landslide      | <input type="checkbox"/> Debris flow       | <input type="checkbox"/> Ground cracking            | Sketch included<br><input type="checkbox"/> Yes<br><input type="checkbox"/> No |
| <input type="checkbox"/> Boulder roll   | <input type="checkbox"/> Lateral spreading | <input type="checkbox"/> Slope creep                |  |
| <input type="checkbox"/> Cliff collapse | <input type="checkbox"/> Debris avalanche  | <input type="checkbox"/> Other <input type="text"/> |  |

More information about hazards observed (include slope heights, instability volumes, block sizes, crack lengths, distance to buildings, location of hazard in relation to buildings etc.)

<input type="checkbox"/> Has hazard affected structure(s)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, list structure (s) <input type="text"/>
<input type="checkbox"/> Has hazard affected access?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Has hazard affected utilities?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	If yes, list structure (s) <input type="text"/>
<input type="checkbox"/> Has hazard affected multiple properties?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	If yes, list structure (s) <input type="text"/>

11

**Survey Extent of Hazard\***

Is the geo-hazard confined to this property?

A Yes ☐B No (if no, describe below or on sketch pad and attach) ☐


12

**Assessment of Life Safety Risk**

List of hazards observed	Potential to Affect Structure				Assessed Life Safety Risk			Structure(s) affected
	Unlikely	Possible	Likely	Impacted	Low	Moderate	High	
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>

13

Is life safety risk mitigated by natural or man-made protection? (if Yes, describe)

☐ Yes ☐ No

14

Is there likely to be further failure or land instability? ☐ Yes ☐ No

If yes, estimated time frame of failure

☐ Hours ☐ Days ☐ Weeks ☐ Months

15

Are there any health hazards that may be present? (if Yes, describe)

☐ Yes   ☐ No

16

## Recommended further actions

Recommended Further Assessment*	Safety Cordon*	Barricades*	Urgency of suggested action*
A <input type="checkbox"/> None B <input type="checkbox"/> Level 2 Rapid Assessment <i>(tick below if particular expertise is required)</i> B1 <input type="checkbox"/> Structural Engineer B2 <input type="checkbox"/> Geotechnical Engineer B3 <input type="checkbox"/> Geotechnical Area Wide Assessment B4 <input type="checkbox"/> Other C1 <input type="checkbox"/> Structural Engineering Assessment D <input type="checkbox"/> Further evaluation to be arranged by building owner:	A <input type="checkbox"/> None required B <input type="checkbox"/> Cordon required  Describe extent (add diagram on separate sheet if required) <div></div>	A <input type="checkbox"/> None required B <input type="checkbox"/> Barricades already in place C <input type="checkbox"/> Barricades required  Describe extent (add diagram on separate sheet if required) <div></div>	A <input type="checkbox"/> Standard B <input type="checkbox"/> Immediate action required
<b>Immediate Actions</b> <div></div>			

17

## Assessment Outcome\*

Observed Damage	Rapid Assessment Outcome
Low risk	W <input type="checkbox"/> <b>CAN BE USED</b>
Moderate risk	Y1 <input type="checkbox"/> <b>RESTRICTED ACCESS TO PART(S) OF THE PROPERTY ONLY</b>
	Y2 <input type="checkbox"/> <b>RESTRICTED ACCESS – SHORT TERM ENTRY ONLY</b> Access to be supervised    A <input type="checkbox"/> Yes    B <input type="checkbox"/> No
High risk	R1 <input type="checkbox"/> <b>ENTRY PROHIBITED</b> (At risk from external factors)
	R2 <input type="checkbox"/> <b>ENTRY PROHIBITED</b> (Severe damage to building)

Team Leader Signature\*

Show building damage, access restrictions or cordoning areas. Identify the building on the sketch and staple the sheet to this assessment form and add any notes if required. Include cross section(s) if helpful. If required add a sketch on a separate sheet of paper showing building damage, access restrictions or cordoning areas. Identify the building on the sketch and staple the sheet to this assessment form.

Sketch included on separate page? ☐ Yes ☐ No Sketch Unique ID:

Photos taken? ☐ Yes ☐ No

#### END OF INSPECTION DATA ENTRY - EMERGENCY OPERATIONS CENTRE USE ONLY

Date data entered ☐ Yes ☐ No

Completed by

#### RAPID BUILDING ASSESSMENT – GEOTECHNICAL SKETCH SHEET

*(Separate sketch pad that can be used for both Geotech and Building assessments)*