

ATC-20 Detailed Evaluation Safety Assessment Form													
Inspection Inspector ID: Affiliation:				_	Final Posting from page 2  Inspected Restricted Use Unsafe								
Inspection date and time:			_ L AM L PN	<u>/</u>		Ulisate							
Building Description  Building name:  Address:			Type of Co  Wood fra  Steel fra  Tilt-up c	ame me oncrete	Concrete shear wall Unreinforced masonry Reinforced masonry Other:								
Building contact/phone: Number of stories above ground Approx. "Footprint area" (square Number of residential units: Number of residential units not l	: below e feet):	ground:	Primary Oc Dwelling Other re	cupancy sidential	☐ Commercial☐ Offices☐ Industrial	Government Historic School							
Evaluation Investigate the building for the case sketch.	conditions below	and check the	e appropriate co Severe	olumn. There		nd page for a							
Overall hazards: Collapse or partial collapse Building or story leaning Other													
Structural hazards: Foundations Roofs, floors (vertical loads) Columns, pilasters, corbels Diaphragms, horizontal bracing Walls, vertical bracing Precast connections Other													
Nonstructural hazards: Parapets, ornamentation Cladding, glazing Ceilings, light fixtures Interior walls, partitions Elevators Stairs, exits Electric, gas Other													
Geotechnical hazards: Slope failure, debris Ground movement, fissures Other													
General Comments:													

Building name:	Inspector ID:																			
Sketch (optional) Provide a sketch of the building or damaged portions. Indicate damage points.																				
Estimated Building Damage If requested by the jurisdiction, estimate building damage (repair cost ÷ replacement cost, excluding contents).																				
<ul> <li>None</li> <li>0−1%</li> <li>1−10%</li> <li>10−30%</li> <li>30−60%</li> <li>60−100%</li> <li>100%</li> </ul>																				
Posting If there is an existing posting from a preversely If there is an existing posting from a preversely Inspected Inspected Inspecting based on uilding are grounds for an Unsafe posting	the r	RES	STRI( eval	CTE uati	D US	SE nd tea	am ju	UN ugbı	SAF nent.	E I . <i>Sev</i>	vere	cond	ditior	ıs en	dang	ering	- j the	ove	rall	
ndicate the current posting below and at INSPECTED (Green placard) Record any use and entry restrictions ex	t the	top o	of pa E <b>STF</b>	age o	one. <b>TED</b>	USE	(Yel	low	plac	ard)		[	์ ⊐ เ	JNS	AFE (	Red	plac	ard)		
Further Actions Check the boxes b			-																	_
☐ Engineering Evaluation recommended☐ Other recommendations: ☐			Stru			_				nical					:					
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