Christchurch Eq. RAPID Assessment Form - LEVEL 1

Inspector Initials DCC · N Mackay
Territorial Authority: Christchurch City
Date of Inspection: 04·03·2011
Time: 14·16
Exterior Only: ✓
Exterior and Interior:

Building Name

Short Name
Address: 29 Neville St Spreydon
GPS Co-ordinates: S° E°
Contact Name
Contact Phone

Storeys at and above ground level
Below ground level
Total gross floor area (m^2)
Year built
No of residential Units: 1

Photo Taken: Yes (No)

Type of Construction

- ☑ Timber frame
- ☐ Steel frame
- ☐ Tilt-up concrete
- ☐ Concrete frame
- ☐ RC frame with masonry infill
- ☐ Concrete shear wall
- ☐ Unreinforced masonry
- ☐ Reinforced masonry
- ☐ Confined masonry
- ☐ Other:

Primary Occupancy

- ☑ Dwelling
- ☐ Other residential
- ☐ Public assembly
- ☐ School
- ☐ Religious
- ☐ Commercial/ Offices
- ☐ Industrial
- ☐ Government
- ☐ Heritage Listed
- ☐ Other

Investigate the building for the conditions listed below:

Overall Hazards / Damage	Minor/None	Moderate	Severe
Collapse, partial collapse, off foundation	☐	☐	☐
Building or storey leaning	☐	☐	☐
Wall or other structural damage	☐	☐	☐
Overhead falling hazard	☐	☐	☐
Ground movement, settlement, slips	☐	☐	☐
Neighbouring building hazard	☐	☐	☐
Other	☐	☐	☐

Comments: NO Damage

Choose a posting based on the evaluation and team judgement. Severe conditions affecting the whole building are grounds for an UNSAFE posting. Localised Severe and overall Moderate conditions may require a RESTRICTED USE. Place INSPECTED placard at main entrance. Post all other placards at every significant entrance.

INSPECTED *GREEN* ☑
RESTRICTED USE *YELLOW* ☐
UNSAFE *RED* ☐

Record any restriction on use or entry:

Further Action Recommended:

Tick the boxes below only if further actions are recommended

- ☐ Barricades are needed (state location):
- ☐ Level 2 or detailed engineering evaluation recommended
  - ☐ Structural ☐ Geotechnical ☐ Other:
- ☐ Other recommendations:

Estimated Overall Building Damage (Exclude Contents)

None	☑		
0-1 %	☐	31-60 %	☐
2-10 %	☐	61-99 %	☐
11-30 %	☐	100 %	☐

Sign here on completion

Date & Time: 04-03-2011
ID: N Mac DCC

Inspection ID _____ *(Office Use Only)*

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