

# ATC-20-1 Bhutan Rapid Evaluation Safety Assessment Form

## Inspection

Inspector ID: \_\_\_\_\_ Evaluation date and time: \_\_\_\_\_  
 Affiliation: \_\_\_\_\_ Areas evaluated:  Exterior only  Exterior and interior

## Building Description

Building name: \_\_\_\_\_  
 Village/gewog/dzongkhag: \_\_\_\_\_  
 Building owner/phone: \_\_\_\_\_  
 Number of stories above ground: \_\_\_\_\_ below ground: \_\_\_\_\_  
 Approx. plinth area (square meters): \_\_\_\_\_  
 Number of residential units: \_\_\_\_\_  
 Number of residential units not habitable: \_\_\_\_\_  
 GPS coordinates: Lat: \_\_\_\_\_ Long: \_\_\_\_\_

## Type of Construction

Rammed earth  Brick masonry  
 Stone masonry  Concrete block masonry  
 Ekra  Timber or bamboo  
 Adobe/mud block  Other: \_\_\_\_\_  
 RCC frame with infill

## Primary Occupancy

Residential  Commercial  Offices  
 Medical services  Industrial  School  
 Public assembly  Other: \_\_\_\_\_  
 Emergency services  
 Check if:  Government  Private  
 Comments: \_\_\_\_\_  
 Digital photo filenames: \_\_\_\_\_

## Evaluation

Investigate the building for the conditions below and check the appropriate column.

### Observed Conditions:

	Minor/None	Moderate	Severe	Comments
Collapse, partial collapse, or building off foundation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Building or story leaning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Racking damage to walls, other structural damage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Rabsel, cornice, brick infill, or other falling hazard	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Ground slope movement, cracking, landslide, rockfall	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Other (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

Comments: \_\_\_\_\_

## Posting

Choose a posting based on the evaluation and team judgment. *Severe* conditions endangering the overall building are grounds for an Unsafe posting. Localized *Severe* and overall *Moderate* conditions may allow a Restricted Use posting. Post INSPECTED placard at main entrance. Post RESTRICTED USE and UNSAFE placards at all entrances.

**INSPECTED** (Green placard)  **RESTRICTED USE** (Yellow placard)  **UNSAFE** (Red placard)

### Usability Category

**G1** Occupiable; no immediate further investigation required.  **Y1** Short-term entry  **R1** Unsafe but stable. Repairs may be possible.  
 **G2** Occupiable; repairs may be necessary.  **Y2** Repairs required for safe entry to damaged parts.  **R2** Unsafe and unstable. May not be repairable.  
 **R3** At risk from adjacent premises or from ground failure.

Record any use and entry restrictions exactly as written on placard: \_\_\_\_\_

## Further Actions

Check the boxes below only if further actions are needed.

Barricades, shoring, or bracing needed in the following areas: \_\_\_\_\_

Detailed Evaluation recommended:  Structural  Geotechnical  Other: \_\_\_\_\_

Other recommendations: \_\_\_\_\_

Comments: \_\_\_\_\_

# ATC-20-1 Bhutan Detailed Evaluation Safety Assessment Form

## Inspection

Inspector ID: \_\_\_\_\_ Evaluation date: \_\_\_\_\_

Affiliation: \_\_\_\_\_ Evaluation time: \_\_\_\_\_

Areas evaluated:  Exterior only  Exterior and interior

## Final Posting from page 2

- Inspected  
 Restricted Use  
 Unsafe

## Building Description

Building name: \_\_\_\_\_

Village/gewog/dzongkhag: \_\_\_\_\_

Building owner/phone: \_\_\_\_\_

Number of stories above ground: \_\_\_\_\_ below ground: \_\_\_\_\_

Approx. plinth area (square meters): \_\_\_\_\_

Number of residential units not habitable: \_\_\_\_\_

GPS coordinates: Lat: \_\_\_\_\_ Long: \_\_\_\_\_

## Type of Construction

- Rammed earth  Brick masonry  
 Stone masonry  Concrete block masonry  
 Ekra  Timber or bamboo  
 Adobe/mud block  Other: \_\_\_\_\_  
 RCC frame with infill

## Primary Occupancy

- Residential  Commercial  Offices  
 Medical services  Industrial  School  
 Public assembly  Other: \_\_\_\_\_  
 Emergency services

Check if:  Government  Private

Comments: \_\_\_\_\_

## Evaluation

Investigate the building for the conditions below and check the appropriate column. Provide a sketch on the second page.

	Minor/None	Moderate	Severe	Comments
<b>Overall hazards:</b>				
Collapse or partial collapse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Building or story leaning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
<b>Structural hazards:</b>				
Roofs, floors (vertical loads)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Roof supports	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Columns, pilasters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Walls, vertical bracing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Foundations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Rabsel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
<b>Nonstructural hazards:</b>				
Ornamentation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Cladding, glazing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Ceilings, light fixtures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Brick infill, partitions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Electric, gas, equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Lifts, stairs, exits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
<b>Geotechnical hazards:</b>				
Slope failure, debris	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Ground movement, fissures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Other _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

General Comments: \_\_\_\_\_

Continue on page 2

Building name: \_\_\_\_\_ Inspector ID: \_\_\_\_\_

**Sketch**  
 Make a sketch of the damaged building in the space provided. Indicate damage points.

Number of residential units not habitable: \_\_\_\_\_

**Estimated Building Damage**

(Use following format for each photo: DzongkhagGewogChiwogHouseNo\_Direction.jpg)

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Posting**

If there is an existing posting from a previous evaluation, check the appropriate box.

Previous posting:  INSPECTED  RESTRICTED USE  UNSAFE Inspector ID: \_\_\_\_\_ Date: \_\_\_\_\_

If necessary, revise the posting based on the new evaluation and team judgment; replace previous posting. *Severe* conditions endangering overall building are grounds for an Unsafe posting. Local *Severe* and overall *Moderate* conditions may allow a Restricted Use posting. Indicate the current posting below and at the top of page one, whether posting has been revised or not.

- INSPECTED** (Green placard)  **RESTRICTED USE** (Yellow placard)  **UNSAFE** (Red placard)

**Usability Category**

- G1** Occupiable; no immediate further investigation required.
- Y1** Short-term entry
- R1** Unsafe but stable. Repairs may be possible.
- G2** Occupiable; repairs may be necessary.
- Y2** Repairs required for safe entry to damaged parts.
- R2** Unsafe and unstable. May not be repairable.
- R3** At risk from adjacent premises or from ground failure.

Record any use and entry restrictions exactly as written on placard: \_\_\_\_\_

**Further Actions** Check the boxes below only if further actions are needed.

- Barricades, shoring, or bracing needed in the following areas: \_\_\_\_\_
- Engineering Evaluation recommended:  Structural  Geotechnical  Other: \_\_\_\_\_
- Other recommendations: \_\_\_\_\_
- Comments: \_\_\_\_\_