

8/1/2008

**Community Animal Response Team (CART) General Information and
Response Capability Statement**

General Information

1. County/City/Community: _____

2. Team Leader:

Name: _____

Address: _____

Phone: _____ (o)

_____ (h)

_____ (cell)

Email address: _____

3. Team Members:

Name: _____

Role: _____

Name: _____

Role: _____

Name: _____

Role: _____

Name: _____

Role: _____

Name: _____

Role: _____

Name: _____

Role: _____

Name: _____

Role: _____

Name: _____

Role: _____

4. Local Emergency Manager:

Name: _____

Phone: _____

Email address: _____

5. Has the CART's team leader met with the local emergency manager to discuss integrating animal response as part of the locality's emergency response plan?

Yes No

6. Has the team leader initiated a written plan detailing emergency response needs, roles and responsibilities specific to animals in that locality? Or has the locality written a plan that can be shared and possibly updated?

Yes No

7. Will any other team member be assuming any specific leadership roles during a disaster (i.e. safety officer, public information officer, logistics chief etc.)? If so, please identify that person and specify the training that person has completed germane to that leadership role.

8. Are any team members interested in training associated with leadership roles in the areas of safety, operations, logistics, training, public information or administration?

Yes No

If no, go to question #10.

9. If so, has this been brought to the attention of the county emergency manager or the State Veterinarian's Office?

Yes No

Response Capabilities

10. What is the scope of services your team will be able to provide? (Check all that apply).

- Animal Sheltering
- Veterinary Medical Clinical Services
- Animal Rescue*
 - Large Animal
 - Small Animal
 - Large and Small Animal
- Disease Outbreak/Depopulation
- Other (please describe below)

For each service, please detail below the number and type of animals your CART can provide services for. Please also estimate the number of days/weeks that your CART would be able to offer these services before requiring additional assistance.

*(If your team's scope of services include animal rescue, please offer as much detail as possible about the specific type of rescue, number of team members who would be involved in rescue activities and the experience, qualifications and training those team members have in this area.)

11. What type of services is your team NOT able to provide? (Please provide as much detail as in regard to either the type of service as listed in question #10 that your CART would not be able to provide or type of animals your CART would not be able to provide services for.)

12. What resources (i.e. facilities, equipment, pharmaceuticals, local support agencies/groups) do you have available to support your CART's response capabilities? (Please be as specific and detailed as possible.)

13. How and where will supplies/equipment/pharmaceuticals maintained by this CART be stored and how will inventory be maintained?

14. Are any members of the team willing to be deployed outside the local community? If so, please identify them below.

