

# Christchurch Eq RAPID Assessment Form - LEVEL 2

WI

Inspector Initials  
Territorial Authority

Se.  
Christchurch City

Date  
Time

7/9/10.  
01145hrs

Final Posting  
(e.g. UNSAFE)

Safe

Building Name

CTU House

Short Name

Type of Construction

Address

2119 Madras St.

Timber frame

Concrete shear wall

Steel frame

Unreinforced masonry

GPS Co-ordinates

S° \_\_\_\_\_ E° \_\_\_\_\_

Tilt-up concrete

Reinforced masonry

Contact Name

Concrete frame

Confined masonry

Contact Phone

RC frame with masonry infill

Other:

Storeys at and above ground level

6

Below ground level

Primary Occupancy

Dwelling

Commercial/ Offices

Total gross floor area (m<sup>2</sup>)

Year built

Other residential

Industrial

No of residential Units

Public assembly

Government

School

Heritage Listed

Religious

Other

Photo Taken

Yes

No

Investigate the building for the conditions listed on page 1 and 2, and check the appropriate column. A sketch may be added on page 3

Overall Hazards / Damage

Minor/None

Moderate

Severe

Comments

Collapse, partial collapse, off foundation

Green Tag 1st assessment  
Call in for inspect.

Building or storey leaning

Wall or other structural damage

Overhead falling hazard

looked at by 3 CC Senior officers  
interviewed Manager - no issues  
signed by users of Building

Ground movement, settlement, slips

Neighbouring building hazard

Electrical, gas, sewerage, water, hazmats

Record any existing placard on this building:

Existing Placard Type  
(e.g. UNSAFE)

Green

Choose a new posting based on the new 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. Transfer the chosen posting to the top of this page.

INSPECTED

GREEN

G1

G2

RESTRICTED USE

YELLOW

Y1

Y2

UNSAFE

RED

R1

R2

R3

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):

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

[Signature]

Date & Time  
ID

12:54hrs. 7/9/10

Inspection ID: 571 (Office Use Only)

PT SEC 805, TOWN CHRISTCHURCH  
PRUP 811144

Structural Hazards/ Damage	Minor/None	Moderate	Severe	Comments
Foundations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Roofs, floors (vertical load)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Columns, pilasters, corbels	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Diaphragms, horizontal bracing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Pre-cast connections	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Beam	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Non-structural Hazards / Damage</b>				
Parapets, 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"/>	
Interior walls, partitions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Elevators	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Stairs/ Exits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Utilities (eg. gas, electricity, water)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Geotechnical Hazards / Damage</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"/>	
Soil bulging, liquefaction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>General Comment</b>				
_____				
_____				
_____				
_____				

**Usability Category**

Damage Intensity	Posting	Usability Category	Remarks
Light damage	Inspected (Green)	G1. Occupiable, no immediate further investigation required	
Low risk		G2. Occupiable, repairs required.	
Medium damage	Restricted Use (Yellow)	Y1. Short term entry	
Medium risk		Y2. No entry to parts until repaired or demolished	
Heavy damage	Unsafe (Red)	R1. Significant damage: repairs, strengthening possible	
High risk		R2. Severe damage: demolition likely	
		R3. At risk from adjacent premises or from ground failure	

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**Sketch (optional)**

Provide a sketch of the entire building or damage points. Indicate damage points.

A large grid for sketching a building or damage points. The grid is approximately 18 columns wide and 20 rows high.

**Recommendations for Repair and Reconstruction or Demolition (Optional)**

A series of horizontal lines for writing recommendations. There are 12 lines in total, providing space for text.