

**Big Bend Community Organizations Active in Disaster  
(COAD)  
Agency Registration**

**\*\*** When complete, please fax to: (850) 606-1971 Attn: Mike Edwards  
or email to: [edwardsm@leoncountyfl.gov](mailto:edwardsm@leoncountyfl.gov)

**1. Please complete this information about your organization.**

Organization Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Agency Main Number: \_\_\_\_\_  
Website: \_\_\_\_\_  
Your Name: \_\_\_\_\_  
Your Position/Title: \_\_\_\_\_

**2. Please give us point of contact information for your organization.**

Name: \_\_\_\_\_  
Position/Title: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Email: \_\_\_\_\_

**3. Please give us your organization's mission statement.**

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

**4. Please tell us what services your organization provides.**

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

**5. Please tell us what services your organization can/would provide after a disaster.**

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



Thank you for completion of this Assessment Tool. Your prompt completion and return of this tool will allow the Big Bend COAD coordinating partners the opportunity to develop an accurate and effective database that can be used during all phases of emergency management. We are requesting you complete this form and return it prior to the next scheduled COAD meeting.

**Definitions:** Franklin = F, Gadsden = G, Jefferson = J, Leon = L, Liberty = LB,  
 Madison = M, Taylor = T, Wakulla = W  
 Management = Mgmt, Operations = Ops

| Capability                    | Yes | No | Areas Served | Areas Willing to Serve | Interpreter Service provided | Free | Fee For Service |
|-------------------------------|-----|----|--------------|------------------------|------------------------------|------|-----------------|
| Animal Services               |     |    |              |                        |                              |      |                 |
| Building Materials            |     |    |              |                        |                              |      |                 |
| Case Work                     |     |    |              |                        |                              |      |                 |
| Chain Saw Team                |     |    |              |                        |                              |      |                 |
| Child Care                    |     |    |              |                        |                              |      |                 |
| Clearing Materials            |     |    |              |                        |                              |      |                 |
| Clothing                      |     |    |              |                        |                              |      |                 |
| Communication Equipment       |     |    |              |                        |                              |      |                 |
| Debris Removal                |     |    |              |                        |                              |      |                 |
| Disaster Financial Assistance |     |    |              |                        |                              |      |                 |
| Disaster Stress Mgmt          |     |    |              |                        |                              |      |                 |
| Donation Mgmt                 |     |    |              |                        |                              |      |                 |
| Dry Wall Removal              |     |    |              |                        |                              |      |                 |
| Emotional/Spiritual Support   |     |    |              |                        |                              |      |                 |
| Food Distribution             |     |    |              |                        |                              |      |                 |
| Heavy Equipment               |     |    |              |                        |                              |      |                 |
| Household Goods               |     |    |              |                        |                              |      |                 |
| Interpreters (specify)        |     |    |              |                        |                              |      |                 |
| Incident Mgmt Team            |     |    |              |                        |                              |      |                 |
| Information and Referral      |     |    |              |                        |                              |      |                 |
| Long Term Recovery            |     |    |              |                        |                              |      |                 |
| Mass Feeding                  |     |    |              |                        |                              |      |                 |
| Pantry Operations             |     |    |              |                        |                              |      |                 |
| Pet/Animal Ops                |     |    |              |                        |                              |      |                 |
| Point of Distribution Team    |     |    |              |                        |                              |      |                 |
| Portable Generators           |     |    |              |                        |                              |      |                 |
| Roof Repairs (Tarps)          |     |    |              |                        |                              |      |                 |
| Safety Training               |     |    |              |                        |                              |      |                 |

