## **CANTO**

## **DISASTER STATUS REPORT**

| Name of telecom organization:  | Contact name:            |
|--|--------------------------|
| Date:  | Contact telephone:       |
| Time:  | Contact e-mail:          |
| Diasater Type  | Alternate Contact:       |
|  | <br>Alternate Telephone: |
|  | Alternate e-mail:        |
|  |                          |
| Summary of current network status: Include estimated percentage of customers without service, list of areas without service, and other pertinent information.  |                          |
|  |                          |
| Summary of response efforts: Include information on assets deployed in the field, forcasted timeframes for service restoration, status in fulfilling any requests for special assistance by external agencies, and any current challenges to response efforts. |                          |
|  |                          |
| Requests for assistance:  References to any current or outstanding requests for assistance, including the name of the agency from which assistance has been requested.   |                          |
| Requests for assistance:  References to any current or outstanding requests for assistance, including the name of the agency   |                          |

## Damage and impact log

|        | Damage description | Location       |          | Current Status |                   | Notes            |  |
|--------|--------------------|----------------|----------|----------------|-------------------|------------------|--|
| Ref. # |                    | Name of locale | Latitude | Longitude      | Impact on service | Response efforts |  |
| 1      |                    |                |          |                |                   |                  |  |
| 2      |                    |                |          |                |                   |                  |  |
| 3      |                    |                |          |                |                   |                  |  |
| 4      |                    |                |          |                |                   |                  |  |
| 5      |                    |                |          |                |                   |                  |  |

| 6 |  |  |  |  |
|---|--|--|--|--|
| 7 |  |  |  |  |
| 8 |  |  |  |  |