Ground Deformation Form

Event Name/Date: ______________________________  Name of investigator: ______________________________

Short description of observation: _____________________________________________  Date of observation: __________________

I. Location: (please be as detailed as possible):

a. Descriptive: ________________________________________________________________

b. Street:

<table>
<thead>
<tr>
<th>Address Number</th>
<th>Direction (N, S, E, W)</th>
<th>Street Name</th>
<th>Suffix (Rd, St, Ave)</th>
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Cross Street (if available):

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c. City: __________________
d. County: __________________
e. Zip: __________________

f. Map Reference (Quad, etc.): __________________
g. Latitude: ________  h. Longitude: ________
i. Thomas Bros. Page: ________  Grid: ________  j. Station ID: ________

II. Surface Fault Rupture:

General description: ____________________________________________________________

Time of observation: ______________  □ Reverse  □ Normal  □ Right-Lateral  □ Left-Lateral

Fault Strike: ________  Fault Dip: ________

Strike-slip (cm): ________  Vertical (cm): ________

Net slip length (cm) ________  Azimuth: ________°

Width of fault trace [latest rupture (m)]: ________

Slickensides, gouge, fault breccia, other: ____________________________________________

Relationship of fault scarp formation and height to local geology, bedrock structure, and geomorphology (include location): ____________________________________________________________

Any additional displacements on nearby or subsidiary faults (mainshock or aftershock)? ____________________________________________________________

Offset as a function of depth: ___________________________________________  Location: __________________

Nature of Faulting (original displacement or renewed displacement on old fault trace): ____________________________________________________________

Amount and sense of displacement: _____________________________________________

Clearinghouse Report Form (Source: EERI, CDMG)  1 of 2  Ground Deformation
Evidence of afterslip:

Location: _____________________________________

Amount: (cm) _________________________________

Sense of movement:  ____________________________

Relation to aftershocks: __________________________

Width of principal fault zone through which new faulting took place: _________________________________

III. Other Ground Failure:

☐ Landslides  ☐ Liquefaction  ☐ Lateral spreading
☐ Settlement  ☐ Ground cracking  ☐ Hydrologic effects (including dam failure)

Describe:  __________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

IV. Effects on Built Environment:

Damage and lack of damage to engineered structures (type):

_____________________________________________________________________________________

_____________________________________________________________________________________

V. Miscellaneous:

Film or digital images (include filename and/or roll information):

_____________________________________________________________________________________

_____________________________________________________________________________________

Sketches/Comments: