Shoreline Impact (SCAT) Summary	1. Incident Name	2. Date/Time Prepared
3. Unit Name	4. Unit Leader	5. For Operational Period

Shoreline segments visited (see attached maps for segment locations):

i.d.	segment name	geographic description	tidal conditions

Visited shoreline segments requiring <u>no</u> cleanup action at this time (barring future impact).

i.d.	Description

Visited shoreline segments requiring cleanup action. See attached SCAT segment reports and maps for more detail.

site i.d.	oiling description, recommendation, & special concerns (e.g., subsurface, environmental) for cleanup
	Description: **Recommendation:** **Special Concerns:**
	Description: **Recommendation:** **Special Concerns:**
	Description: **Recommendation:** **Special Concerns:**
	Add more lines as necessary

NOTE: *any special notes or reminders to be passed along to the cleanup crews*

Prepared by:	Approved by (Incident Commander):	
		Page ___ of ___