



# COSTEP MA

Coordinated Statewide  
Emergency Preparedness

YOUR EMERGENCY MANAGEMENT PARTNER FOR CULTURAL RESOURCES

## Cultural Resources Inventory Form

Institution Name			
Institution Address			
City / Town		Zip Code	
Latitude / Longitude			
Website			

### 1. Contact Information

#### Primary Contact

Name	
Title	
Work Phone	
24-Hour Phone	
Email	

#### Secondary Contact

Name	
Title	
Work Phone	
24-Hour Phone	
Email	

### 2. Type of Institution (Check all applicable)

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Arboretum                      | <input type="checkbox"/> Archaeological Site            | <input type="checkbox"/> Archives/Manuscripts Repository |
| <input type="checkbox"/> Church/Religious Organization  | <input type="checkbox"/> Court                          | <input type="checkbox"/> Historic Landscape              |
| <input type="checkbox"/> Historic Structure             | <input type="checkbox"/> Historical Society             | <input type="checkbox"/> Library, Public                 |
| <input type="checkbox"/> Library, Research              | <input type="checkbox"/> Library, Special               | <input type="checkbox"/> Government Records Repository   |
| <input type="checkbox"/> Museum, Art                    | <input type="checkbox"/> Museum, History                | <input type="checkbox"/> Museum, Outdoor                 |
| <input type="checkbox"/> Museum, Science                | <input type="checkbox"/> Museum, Tribal/Cultural Center | <input type="checkbox"/> Performing Arts                 |
| <input type="checkbox"/> University/College Collections | <input type="checkbox"/> Zoo                            |  |

Other (Please specify)

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### 3. Collections (Check all applicable)

- |   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Archaeological           | <input type="checkbox"/> Archives/Manuscripts  | <input type="checkbox"/> Arms & Armor               | <input type="checkbox"/> Audio/Visual(eg.,film, reel-to-reel) |
| <input type="checkbox"/> Blueprints/Arch.Plans    | <input type="checkbox"/> Books, Circulating    | <input type="checkbox"/> Books, Rare                | <input type="checkbox"/> CDs & DVDs                           |
| <input type="checkbox"/> Electronic Records       | <input type="checkbox"/> Ethnographic          | <input type="checkbox"/> Glass & Ceramics           | <input type="checkbox"/> Historic Structures                  |
| <input type="checkbox"/> Living Animals           | <input type="checkbox"/> Living Plants         | <input type="checkbox"/> Machinery                  | <input type="checkbox"/> Maritime Artifacts                   |
| <input type="checkbox"/> Maritime Vessels         | <input type="checkbox"/> Metal Objects         | <input type="checkbox"/> Microforms                 | <input type="checkbox"/> Paintings                            |
| <input type="checkbox"/> Paper (newspapers, maps) | <input type="checkbox"/> Photographs/Negatives | <input type="checkbox"/> Religious/cultural iconog. | <input type="checkbox"/> Sculpture                            |
| <input type="checkbox"/> Taxidermy Specimens      | <input type="checkbox"/> Textiles              | <input type="checkbox"/> Wood Objects               |   |

Other  
(Please specify)

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**4. Do any of the following potential hazards exist in your institution's collections? (Check all applicable)**

☐ Arsenic  
(e.g., taxidermy, textiles, etc.)

☐ Asbestos

☐ Firearms / Ammunition

☐ Moldy Materials

☐ Nitrate Film

Chemicals (Please specify)

Other (Please specify)

**5. Does your institution have a catalog/inventory of records/finding aids?**

☐ Yes

☐ No

If yes, please indicate the format(s): ☐ Paper ☐ Electronic - internal ☐ Electronic - external

Would the items be available in the event of a disaster?

☐ Yes

☐ No

Has prioritization of the collections been done to identify the most important ones to be recovered first in the event of a disaster?

☐ Yes

☐ No

If so, where does the list reside?

Who is aware of the priorities?

**6. Description of Institution**

**A. Site**

Is your building an historic structure?

☐ Yes

☐ No

Is a site/building plan available in the event of a disaster?

☐ Yes

☐ No

Describe area surrounding building/site:

Approximate lot size? (Please describe in feet)

Type of construction?

Number of floors?

Year of construction?

General condition?

**B. People**

Average number of staff on-site per day?

Does your institution host group tours?

☐ Yes

☐ No

Average number of visitors per day?

**7. Does your institution have a disaster plan and/or COOP\*?**☐ Yes ☐ No**\*Continuity of Operations Plan**

If yes, please answer the following questions:

What is the date of the most recent version?

Has the disaster plan been practiced?

☐ Yes ☐ No

Has your institution worked with other institutions in developing this plan?

☐ Yes ☐ No

If yes, please list the partnering institutions:

Has there been any contact with fire and/or police departments and the local emergency management director (EMD)?

☐ Yes ☐ No

Is this plan on file with the EMD?

☐ Yes ☐ No

Is this plan on file with the fire department?

☐ Yes ☐ No

Does the plan include a communication plan?

☐ Yes ☐ No

Does the plan include an evacuation plan?

☐ Yes ☐ No

If yes, has the evacuation plan been practiced?

☐ Yes ☐ No**8. Is your institution in a flood plain?**☐ Yes ☐ No**9. Insurance**

Does your facility have federal flood insurance?

☐ Yes ☐ No

Does your facility have property insurance for the building?

☐ Yes ☐ No

Does your facility have property insurance for the objects/collections?

☐ Yes ☐ No**10. Does your institution have disaster recovery supplies on hand?**☐ Yes ☐ No

If so, what is included in the supply list?

Are supplies stored on-site or off-site?

**11. What kind of recovery expertise will be needed in the event of a disaster? (Check all applicable)**☐ Book/paper conservation☐ Building restoration☐ Building drying☐ Commercial freeze-drying☐ Electronic media recovery☐ Film restoration☐ Fine Art conservation☐ Object conservation☐ Off-site storage☐ Off-site work space☐ Photograph conservation☐ Project supervision☐ Textile conservationOther  
(Please specify)

**12. What type of immediate, fundamental security needs would your facility have in the event of a large-scale disaster?**

Please specify:

**13. Does your facility have any of the following on-site? (Check all applicable)**

☐ Climate controls

☐ Fire detection/Alarms

☐ Fire suppression system

☐ Generator\*

☐ Generator plug-in\*

☐ Security system

\*Specify generator/plug-in type

If generator runs on fuel, is a supply kept on hand?

☐ Yes

☐ No

**14. What type of resources could your institution offer in the event of a disaster? (Check all applicable)**

☐ Freezer storage

☐ Internet access

☐ Kitchen facilities

☐ Meeting room space

☐ Staff

Other  
(Please specify)