



LIVE WELL  
SAN DIEGO



### Coronavirus Disease-19 (COVID-19) Response: Handwashing Station Request Form

On March 3, 2020, your City received a letter from the County of San Diego Public Health Officer, Dr. Wilma Wooten, regarding the placement of Handwashing Stations (HWS) in your jurisdiction, as a preventive measure for COVID-19. Requests should be submitted to the County Handwashing Station Coordinator, Caroline Mosher, via email at [MOC.LOGS.HHSA@sdcounty.ca.gov](mailto:MOC.LOGS.HHSA@sdcounty.ca.gov).

	Yes	No	Handwashing Station Criteria
1.			Location must have direct vehicle drive up access (within 25 feet) to handwashing station.
2.			Location must be accessible & visible.
3.			If on City Property, location must be within 4 feet from where the street ends; or provide written permission from property owner to deploy handwashing station on requested site.
4.			Location does not block the right of way.
5.			Location by an existing permanent trash can is strongly preferred.
6.			Location must be in an area where individuals who are homeless congregate or frequent and do not already have available access to hand washing.
7.			Location must be strategically placed and a fair distance from other county handwashing stations.
8.			Location must be on a flat surface.
9.			Requestors must complete/submit the information below. This form must include a picture of the desired site, a physical address, and a site point of contact. All requests must be submitted via email.

Handwashing Station Request Form			
Once the Handwashing Station Criteria Section is completed, please provide the total number of yes/no responses below.			Date:
NUMBER OF RESPONSES: YES: _____ NO : _____			
Name of Requestor:		Phone Number:	Email Address:
Facility Name:	Facility Region:	Facility Division:	
Address:	City:	Zip Code:	
Provide a detailed description of handwashing station location at requested site:			
<input type="checkbox"/> Attach a photo of the desired location site for placement of the handwashing station to the email.	Site Point of Contact (POC) Name:		Site Point of Contact (POC) Title:
	POC Phone Number:		POC Email:
Comments/Instructions:			
<b>OFFICE USE ONLY:</b>			
Handwashing Station Request Received		Date:	
Handwashing Station Placement		Date:	

For any questions, please contact Caroline Mosher at [MOC.LOGS.HHSA@sdcounty.ca.gov](mailto:MOC.LOGS.HHSA@sdcounty.ca.gov).