



RESIDENTIAL & BUSINESS ASSESSMENT

(Complete a form for each jurisdiction.)
ATTACH 911 MAP OF AFFECTED AREA

County _____

Local Point of Contact _____

Name Address

Date of Damages _____

Phone Numbers _____

Business Home Cell 24 Hour

Date of Assessment _____

E-Mail _____

Damages Caused by _____

Name of Person filling out this Report _____

NAME	ADDRESS	Sr. Cit. Y/N	TYPE			HABITABILITY					STATUS		INSURANCE				INCOME			
			* S.F.	** M.F.	*** M.H.	AFTD	MINOR	MAJOR	DEST	INACCESS-IBLE	OWN	RENT	NFIP	HO	Sewer Back Up	Sump Pump Failure	L	M	H	
1.																				
<i>Comments (see impact statements below)</i>																				
2.																				
<i>Comments (see impact statements below)</i>																				
3.																				
<i>Comments (see impact statements below)</i>																				
4.																				
<i>Comments (see impact statements below)</i>																				

* Single Family

** Multi-Family

*** Mobile Home

NOTE: Sr. Citizen = senior (60+ yrs of age) living in residence

Impact Statements: deaths, injuries, mental health needs, transportation loss, inaccessibility to private property, language barriers, average home value for the area, functional status of wells and septic systems, identification of personal property losses, special populations [i.e. elderly, non English speaking, college students, minorities, and percentages of each group affected]

Notes: Walkout basements are considered first floor. Income levels: Low (L) = <\$20,000; Moderate (M) = \$20,001 to \$50,000; High (H) = >\$50,000; (Percentage of affected homes with low income.) construction type [frames, masonry, etc.] _____

Describe other damages to roads, bridges, culverts, utilities, businesses, and agriculture (crops, fences, terraces, equipment, out buildings).