FLOOD DAMAGE ASSESSMENT

DATE:	NAME:	
EMAIL:		
PHONE:		
ADDRESS:		
DO YOU OWN OR RE	NT?	
CHOOSE ONE: SIN	GLE FAMILY / MULTI-FAM	IILY / MOBILE HOME / BUSINESS
	T: :	IS THE BASEMENT A LIVING AREA? YES / NO (CIRCLE ONE)
		ERS / RENTAL / FLOOD / NONE
WAS THERE ANY STE	RUCTURAL DAMAGE? YES	S / NO CLE ONE)
ADDITIONAL COMME	NTS:	
SIGNATURE:		DATE: