

Damage Assessment Form



| Street Number: | Street Name: | |
|--|---|----------|
| Latitude: | Longitude: | |
| USNG: | High Water Line: | (inches) |
| Damage Type: Affected Minor Major Destroyed Unknown | Structure Type: SF: Single Family MF: Multi-Family MH: Mobile Home Biz: Business Unknown | |
| Inaccessible: Yes No | Insured: Yes No | |
| Ownership: Owner Renter Secondary Picture Name: | | |
| Team Name: | | |
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