

HURRICANE FLOOD DAMAGE ASSESSMENT

Date: _____

Name: _____

If married provide spouse name: _____

Permanent Address: _____

Current Address: _____

Current County: _____ Current Phone Number: _____

(Please list the state if you are residing out of state) _____

Email Address: _____

Did you Own or Rent your prior residence? Yes _____ or No _____ If owner, is the deed in your name? _____ Tax value of the home: _____

Do you have a mortgage? _____ If so, how much is owed? _____

Please indicate the number of: Household residents: _____ Minor children: _____ Senior Citizens: _____ Disabilities: _____ Type of disability: _____

Was the property owner-occupied? _____ If not, did a family member live in the residence: _____

Do you own any other properties or businesses affected by the hurricane? _____ (If so, please attach a sheet with the address and damage description. For businesses, identify the type of business, number of employees, damage description and whether you have re-opened. Please also indicate if you were a landlord and the number of tenants).

Have you registered with FEMA? _____ Small Business Association: _____ Has FEMA done an inspection? _____ Do you have a copy of repair estimate? _____ (attach)

Amount of repair estimate? _____

What kind of damage did your residence have? _____

Have any repairs been completed? _____ Did you have homeowners or renters insurance? _____

Did you file a claim? _____

Name of the insurance company? _____

Phone No. _____ Have you received any insurance money? _____

Do you have your photo I.D.? _____

Do you have your important documents? (ex. Social Security Card, Birth Certificate) _____

Do you have the important documents for your minor children? _____

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Was your vehicle damaged? _____ Do you have the car title? _____

Please list any missing documents? _____

Are you currently employed? _____

Were you employed before the storm? _____

Were/Are you receiving any other benefits (Social Security, Disability, Food Assistance)?:

Do you want to return to or continue living in your property? _____

Are you interested in selling your property? _____

Are you receiving rent assistance? _____ Finding new housing? _____

Any other concerns: _____

What is the best way to contact you? Cell: _____ Email: _____ Other _____

Please provide contact information for all selected request:

Cell number: _____

Email Address: _____

Other Contact: _____

Signature of Requestor _____ Date _____

Church Pastor or Representative _____ Date _____