

# Preliminary Damage Assessment

DATA COLLECTION ORGANIZATION: \_\_\_\_\_

**Event:**

**Date:**

**Observer:**

**Address / Identifying Information:**

**Dwelling Type:**  SF  MF  MH  CN **Degree of Damage:**  Minor  Major  Destroyed

Roof Cover Damage 25%	
Roof Cover Damage 50%	
Roof Cover Damage 75%	
Roof Cover Damage 100%	
Roof Structure Damage 25%	
Roof Structure Damage 50%	
Roof Structure Damage 75%	
Roof Gone	

Windows/Doors Gone 25%	
Windows/Doors Gone 50%	
Windows/Doors Gone 75%	
Windows/Doors Gone 100%	
Single Wall Breached	
Multiple Walls Breached	
Single Wall Collapsed	
Multiple Wall Collapsed	

**Water Damage (ft):**  1  2  3  4  5  6  7  8  9  10  11  12  13  
 14  15  16  17  18  19  20  21  22  23  24  25

**Inaccessible:**  Y  N **Habitable:**  Y  N **Probable Assistance:**  Home Repair  Rental

**Insurance:**  Home Owner  Flood  Low Income  None

**Notes:**

**Requested Field Assistance:**  Water  Food  Other \_\_\_\_\_

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