

INITIAL DAMAGE ASSESSMENT - PUBLIC ASSISTANCE

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|--------------------------|----------------------|--|-----------------------------|----------------------------|----------------------------|
| (1) DAMAGED ENTITY _____ | (3) POPULATION _____ | (7) INCIDENT <input checked="" type="checkbox"/> FLOOD | (8) ADD'L INFO SOURCE _____ | (10) ASSESSMENT TEAM _____ | (11) INCIDENT PERIOD _____ |
| (a) County Government | (b) Municipality | (4) ANNUAL OP BUDGET _____ | () FLOOD | _____ | _____ |
| (c) Private Non-Profit | (d) Indian Tribe | (5) OUTSTANDING DEBTS (_____) | () HURRICANE | (9) TELEPHONE NUMBER _____ | (12) DATE OF SURVEY _____ |
| (Specify One) | | (6) NET BUDGET _____ | () TORNADO | _____ | _____ |
| (2) COUNTY _____ | | | () OTHER _____ | _____ | (13) PAGE ____ OF ____ |

REF NO.	NAME/LOCATION (STREET, SR, X-ROADS, ETC.)	DESCRIPTION OF DAMAGE	CATEGORIES (DOLLARS)							TOTAL ESTIMATED DAMAGES	DOLLAR AMOUNT INSURANCE COVERAGE	TOTAL ESTIMATED UNINS. LOSSES	COMMENTS (NOTE ANY IMPACTS DUE TO LOSS)
			A DEBRIS REMOVAL	B PROTEC-TIVE MEASURES	C ROADS, SIGNS, BRIDGES	D WATER CONTROL	E BLDGS & EQUIP.	F PUBLIC UTILITIES	G PARKS & REC. & OTHER				
(14)	(15)	(16)	(17)	(18)	(19)	(20)	(21)	(22)	(23)	(24)	(25)	(26)	(27)
TOTALS													

(28) TOTAL EST. UNINS. LOSS/POPULATION = \$ _____ /CAPITA
 (29) TOTAL EST. UNINS. LOSS/NET BUDGET x 100 = _____ % IMPACT ON BUDGET