Hurricane Damage Preliminary Assessment Report

Name of Wind Storm Eve	nt:								
Facility Name:									
Address:									
Building Name or Number	r								
Building Value:	Content Value:								
GPS Coordinates:									
Assessment Date:									
A 11-1114	Name	Diffi - ult	Lucy and the land			0			
Accessibility	None	Difficult	Impossible			Comments			
Road to work									
Parking lot									
Site/building									
Utilities	None	Limited	Available			Comments			
Water									
Sewage									
Electricity									
Phone service									
Building Condition –		2-0/			10001				
% of Damage	None	25%	50%	75%	100%	Comments			
Windows									
Doors									
Walls									
Ceiling									
Roof									
Floors									
Office Space	None	25%	50%	75%	100%	Comments			
Work areas									
Storage rooms									
Meeting rooms									
Waiting rooms									
Hallways									
Restrooms									
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Office Equipment	None	25%	50%	75%	100%	Comments
Furniture						
Records/files						
Supplies						
Electronic equipment						
Computers						
Photocopier						
Printer						
Telephones						
Fax machine(s)						
Vehicles						
Other						

Proceed with Caution:

- 1.) Survey damaged building
- 2.) Document all problems/conditions in attached form
- 3.) Include the approximate percentage of damage for each category in building

Completed by:

Additional Comments:			