				age Assessme Individual Pro				
COUNTY: NAME:				MUNIC	CIPALITY:			
STREET ADDRESS:								
CITY:		PA, ZIP						
CODE:	Date:							
LONGITUDE: LATITUDE:								
Location Notes:  Primary Home						rimarı, Hama	Yes	No
					Renter			
SYSTEM	DAMAGED % R.C			R.C.	DAMAGE			
		Mobile		Mobile				Mobile
Foundation	Home	Home	Home 7	Home	Destroyed		Home	Home
					·			
Floor (Frame)			16	20	Major			
Exterior Walls			14	35	Minor			
Roof			9	20	Affected			
Interior Walls			28	25	Inaccessible			
Pumbing			10		NOTE: Non-observa			
Heating/A.C.			10		inspection from the			
Electrical			6		systems can be obser		ved if you are the dwelling.	able to walk
Total % Damaged								
X Estimated Replacement Cost =								
= Estimated Structural Damage \$								
+ Estimated Damage to Contents \$								
= Total Estimated Damage \$ \$0.00								
COMMENTS:							Yes	No
Flood Insurance						nce		
Basement Water**								
First Floor Water**								
**Height Water (Inches):  Additional comments								
Additional Comments								
NAME OF ASSESSOR:								
DATE:								
Note: If you left click on any item that is on this sheet that is in blue a discription of that item will appear.								