



IA Damage Assessment Form

Event Name:	
County:	
Incident Date:	

Date of Assessment:	
Assessment Completed by:	

Location Address: _____

1. What event type caused the damage?

- Straight-Line Winds/Derecho Tornado
- Hurricane
- Fire

- Flood
- Tropical Storm/Depression

2. Is this home occupied at least 6 months per year?

- Yes
- No

- Unknown

3. Owner or renter?

- Owner
- Renter

- Unknown

4. Is there insurance (homeowners or renters)?

- Yes
- No

- Unknown

5. Type of dwelling:

- Single
- Family Multi-Family

- Manufactured Home

6. If multi-family, how many units were impacted? _____

7. Are the utilities functional?

- Yes
- No

- Unknown

8. Using the Damage Level Criteria Matrix supplement, select the level of damage assessed:

- Affected
- Minor
- Major
- Destroyed

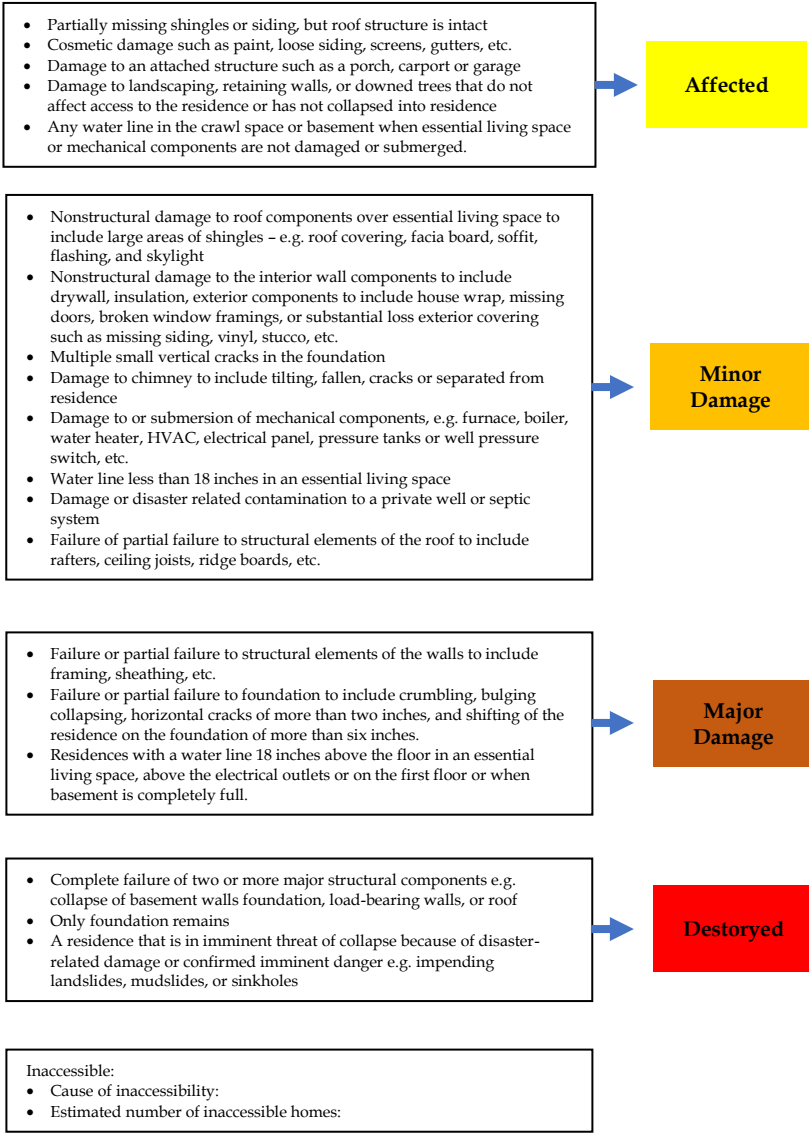
- Inaccessible
- Cause of inaccessibility: _____

- Estimated number of inaccessible homes: _____

Notes:

Single Family or Multi-Family

Damage Level Criteria Matrix



Manufactured Homes

Damage Level Criteria Matrix

