

APPENDIX 6



THE AMERICAN INSTITUTE OF ARCHITECTS

Date _____
 Component _____
 Contact # _____

Damage Assessment Worksheet

First Name _____ Last Name _____

Address _____ City _____ State _____ ZIP _____

Business Phone _____ Residential Phone _____

Market Value _____ Rent _____

Owner's Name _____ Temporary Address _____ Temporary Phone _____

Appointment _____ Age of Building _____

Financial Status

Insurance

Company _____ Existing capital _____

Amount _____ SBA contacted _____

HUD contacted _____

Extent of Damage

- Severe
 Moderate
 Minor

APPLICANTS: DO NOT WRITE BELOW THIS LINE

Identity

Type of Construction

- | | | | |
|-------------------------------------|---------------------------------------|---------------------------------------|-----------------------------------|
| <input type="checkbox"/> Wood-frame | <input type="checkbox"/> Brick veneer | <input type="checkbox"/> Siding | <input type="checkbox"/> Asbestos |
| <input type="checkbox"/> Stucco | <input type="checkbox"/> Conc-block | <input type="checkbox"/> Wood Joists | |
| <input type="checkbox"/> Wood | <input type="checkbox"/> Masonry | <input type="checkbox"/> Steel Joists | |

Approximate size _____ sq. feet

Roofing

- Wood Shingles Asph. Shingles Built-up Other _____

Extent of Damage

Exterior

Number of Sq. Feet Affected

Structural Type _____

Exterior Walls _____

Roof _____

Garage _____

Interior

Number of Sq. Feet Affected

Floor _____

Partitioning _____

Doors _____

Storm Doors _____

Windows _____

Storm Windows _____

Ceiling _____

Electrical _____

Plumbing _____

Mechanical _____

Remarks

Date _____

Architect's remarks:

Survey or _____

Date received _____

Architect _____