Basic Damage Report

Type of Event (Fire, Storm, etc): _____ **Report Date:** _____

Property Name: _____ **EMAIL:**_____

Address: _____**City :** _____ **County:** _____
(with Zip Code)

Contact person: _____ **Contract Phone:** _____

Was there any damage due to the event? If yes, please explain:

Were any residents displaced as a result? If so, how many and where were they relocated to?

Are there any vacant units that may be used for housing residents displaced by the event? If so, please indicate as follows:
(*Note: availability varies constantly – places contact property for information)*

Unit size:	0 BR		1 BR		2 BR		3 BR		4+BR	
	Subsidized	Un subsidized	Subsidized	Un subsidized	Subsidized	Un subsidized	Subsidized	Un subsidized	Subsidized	Un subsidized
# of units available:										
# of Applicants Waiting List										
Date of first availability										
Deposit amount:										
Rent amount:										

Comments:

Resource Description: (Please check all that apply)

Appliances provided: ___Stove ___Refrigerator ___Dishwasher ___Microwave

Utilities provided: ___All ___None ___Cable TV ___Electric ___Propane ___Gas ___Sewer
___Trash ___Water ___Heating Oil

Lease required: ___None ___3 mos. ___ 6 mos. ___9 mos. ___ 12 mos.
___Month to Month Other: _____

Type of dwelling: ___Apartment ___Mobile Hm. ___ Duplex ___Efficiency ___House
___Condo ___ Room ___Studio ___Townhouse ___Trailer

Please check all that apply to the property: ___Children ___Furnished ___Pets Allowed
___ Handicap Accessible ____Section 8

Completed by: _____