

SBA PHYSICAL DISASTER PRELIMINARY DAMAGE ASSESSMENT

The purpose of this form is for businesses to document damages immediately after the event occurs. It will be utilized by Local, State and Federal governments during the SBA Physical Disaster Declaration process. By providing the information below businesses are not obligated to participate in the program should a declaration be issued.

All fields are required. If a field is not applicable fill in "N/A". Photographs of the damages are a requirement, as in person assessments will not be carried out.

Owner Details

Last Name: _____ First Name: _____
Work Phone : _____ Home Phone: _____
Email: _____

Business Owner Mailing Address

Address: _____
City: _____ State: _____ Zip Code: _____ County: _____

Business Street Address

Address: _____ Same As Above
City: _____ State: _____ Zip Code: _____ County: _____

Business Details

Name of Business: _____ Type of Business: _____
Building Ownership Status (Select One): Owner Renter
County Assessor's Property Value: _____

Damage Details

Damage Type - Select All That Apply

Real Property (Building), if owned Contents (includes machinery/equipment, furniture and fixtures, inventory, leasehold improvements, etc.)
 Other: _____

Extent of Damage - Select One

Major Damage Minor Damage

Estimated Percentage of Loss: _____ Estimated Dollar Damage: _____

Damage Date: _____

Cause of Damage: _____

Damage Description:

Insurance Details

Insurance for Civil Unrest Yes No Underinsured Yes No Insurance recovery expected or received for property damages: _____

Form Completed By: _____ Title: _____ Date: _____

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At least one photograph is required. Photograph(s) should capture the extent of the damage detailed on page 1 of this assessment.

Photo 1



Description:

Empty space for the description of Photo 1.

Photo 2



Description:

Empty space for the description of Photo 2.

Photo 3



Description:

Empty space for the description of Photo 3.

Photo 4



Description:

Empty space for the description of Photo 4.