

SBA PHYSICAL DISASTER SURVEY SHEET

I. NAME:				Date of Damage:	
Address:					
Present Telephone Number:		Area Code		Telephone	
				Type of Disaster: Flooding	
Name of Property					
Owner:					
Type of Applicant or Structure:	Renter:		Homeowner:		Other:
	Single Family:		Business:		
	Multiple Family:		Nonprofit:		
<i>Place a check mark</i>					
2. MARKET VALUE OF PROPERTY -Please provide fair market value (FMV) pre-disaster or fair replacement value. Use whichever is lower.					
STRUCTURE		(includes total cost to replace primary buildings) Home, mobile home, business structure, detached garage, storage building, other			
CONTENTS		(includes total cost to replace personal/business property) Personal - clothing, furniture, household, appliances, other Business - machinery, equipment, inventory, other			
LAND AND IMPROVEMENTS		(includes total cost to replace/repair damage to land) Land + Access road, bridge, driveway, sidewalk, parking lot, fencing, landscape, utilities, sewer lines, debris removal/other.			
Name - Phone No. of Insurance Co./Agent					
3. ESTIMATED DISASTER LOSS IN DOLLARS				Structures	
				Contents	
				Land and Improvements	
4. AMOUNT OF INSURANCE				Structure	
				Contents	
				Land and Improvements	
5. DOLLAR AMOUNT OF UNINSURED LOSS					
(Estimated Disaster Loss) (3) - (Amount of Insurance) (4) = Total					
				Structure	
				Contents	
				Land and Improvements	
				TOTAL	
6. PERCENT OF UNINSURED LOSS (5) DIVIDED BY(2) = % UNINSURED LOSS					
<i>Dollar Amount of Uninsured Loss divided by Fair Market/Replacement Value.</i>					
Structure	Paragraph (5)	_____	Divided By Para (2)	_____	= _____ % Uninsured Loss
Contents	Paragraph (5)	_____	Divided By Para (2)	_____	= _____ % Uninsured Loss
Land & Improver	Paragraph (5)	_____	Divided By Para (2)	_____	= _____ % Uninsured Loss
Use one with largest percentage					
7. COMMENTS: Provide details of loss.I.E. Kitchen and Bedrooms destroyed. Continue on reverse side if necessary.					

