

Date: ___/___/___ Storm: _____ GPS Location: Lat. _____ Lon. _____

Address: Street _____ City _____ State _____ Zip _____

Type of Inspection: Exterior Exterior & Interior Debris Photos: Roll _____ Frames _____ to _____

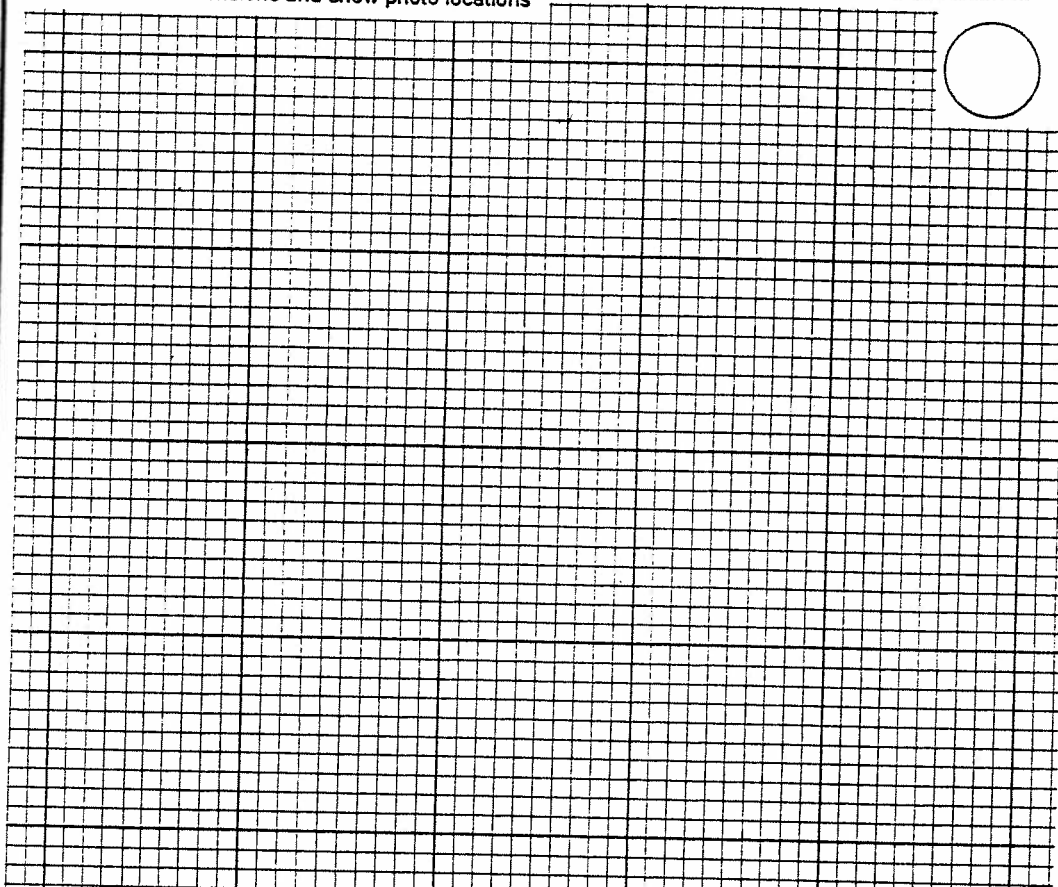
Type of Exposure:

- | | |
|------------|--------------|
| 1 = Water | 4 = Suburban |
| 2 = Open | 5 = Forests |
| 3 = Sparse | |

1st City Block	>1 City Block
N _____	N _____
E _____	E _____
S _____	S _____
W _____	W _____

Sketch of Building Layout - Roof Plan
Give overall dimensions and show photo locations

Indicate North Dir.



Indicate Location and Type (roof covering, roof sheathing, window, wall, door or connection) of Damage if Any

Building Height Relative to Surrounding

Buildings Vegetation

- | | |
|--|--|
| <input type="checkbox"/> Shorter | <input type="checkbox"/> Shorter |
| <input type="checkbox"/> Same | <input type="checkbox"/> Same |
| <input type="checkbox"/> 1 Story Taller | <input type="checkbox"/> 1 Story Taller |
| <input type="checkbox"/> >1 Story Taller | <input type="checkbox"/> >1 Story Taller |

General Terrain Description

- | | |
|------------------------------------|---------------------------------|
| Type: | Location: |
| <input type="checkbox"/> Flat | <input type="checkbox"/> Valley |
| <input type="checkbox"/> Hills | <input type="checkbox"/> Middle |
| <input type="checkbox"/> Mountains | <input type="checkbox"/> Top |

Building Use:

- Single Family
- Duplex
- Apartment
- Condominium
- Industrial
- Commercial
- Hotel
- Other _____

Primary Roof Shape

- Gable
- Hip
- Gable / Hip Comb.
- Flat
- Shed (Mono-slope)
- Mansard (Barn)
- Multi-Level Roof

Type of Roof Covering

- Thin Asphalt Shingles
- Thick Asphalt Shingles
- Wood Shingles
- Flat Clay Tiles
- Barrel Clay Tiles
- Concrete Tiles
- Standing Seam Metal
- Other Metal Except Tile
- Metal Tile
- Built-up with Gravel
- Built-up w/o Gravel
- Single Ply
- Other _____

Type of Roof Sheathing

- Not Visible
- Plywood
- OSB
- Wood Planks
- Particle Board
- Other _____
- Thickness _____ in.

Roof Sheathing Damage

- None
- 1 Sheet
- 2 to 5 Sheets
- <25% of Roof
- 25-50% Roof
- >50% Roof
- All

Building Layout

- I H
- L U
- T

Primary Roof Slope

- Shallow (0 to 10 deg)
- Moderate (10 to 30 deg)
- Steep (>30 deg)

Attachment of: Roof Covering Sheathing

- | | | |
|-----------------|--------------------------|--------------------------|
| No Access | <input type="checkbox"/> | <input type="checkbox"/> |
| Nails | <input type="checkbox"/> | <input type="checkbox"/> |
| Staples | <input type="checkbox"/> | <input type="checkbox"/> |
| Adhesive | <input type="checkbox"/> | <input type="checkbox"/> |
| Screws | <input type="checkbox"/> | <input type="checkbox"/> |
| Other _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| Size & Schedule | | |

No. of Stories _____

Overall Building Height _____ ft.

Elevated on Piles? Y N

Roof Covering Damage

- None
- < 10%
- 10-25%
- 25-40%
- >40%



Exterior Wall Type	Ground Floor	Upper Floors	Damage Severity ____, Extent of Damage ____			
			North Face:	East Face:	South Face:	West Face:
CMU	<input type="checkbox"/>	<input type="checkbox"/>	---	---	---	---
Wood Lap	<input type="checkbox"/>	<input type="checkbox"/>	---	---	---	---
Aluminum	<input type="checkbox"/>	<input type="checkbox"/>	---	---	---	---
Vinyl	<input type="checkbox"/>	<input type="checkbox"/>	---	---	---	---
Brick	<input type="checkbox"/>	<input type="checkbox"/>	---	---	---	---
Stucco	<input type="checkbox"/>	<input type="checkbox"/>	---	---	---	---
Plywood	<input type="checkbox"/>	<input type="checkbox"/>	---	---	---	---
Metal	<input type="checkbox"/>	<input type="checkbox"/>	---	---	---	---
Curtainwall	<input type="checkbox"/>	<input type="checkbox"/>	---	---	---	---
EIFS	<input type="checkbox"/>	<input type="checkbox"/>	---	---	---	---
Other _____	<input type="checkbox"/>	<input type="checkbox"/>	---	---	---	---

Damage Severity Index

0 = None
 1 = dents, coin size damage
 2 = holes in siding exposing insulation
 3 = holes, missing panels

Extent of Damage Index

0 = None
 1 = <10%
 2 = 10-25%
 3 = 25-40%
 4 = >40%

Window Systems: Number ____, No. Damaged ____

	North Face:	East Face:	South Face:	West Face:
Small Windows (less than 2ft by 2ft)	---	---	---	---
Moderate Size (less than 3ft by 6 ft)	---	---	---	---
Large or Picture Windows	---	---	---	---
Window Walls (more than 1/2 wall in glass)	---	---	---	---

Check if present, Extent of Damage Index ____

Store Front (ground floor)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Curtain Wall System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Glazing Protection:

Yes	No	Type	Type of Protection
<input type="checkbox"/>	<input type="checkbox"/>	---	1 = Plywood w/o Perm Fix
<input type="checkbox"/>	<input type="checkbox"/>	---	2 = Plywood with Perm Fix
<input type="checkbox"/>	<input type="checkbox"/>	---	3 = Manufactured
<input type="checkbox"/>	<input type="checkbox"/>	---	4 = Tape

Exterior Doors: Number ____, No. Damaged ____, Door Damage Index ____

	Door Damage Index				Braced	
	North Face:	East Face:	South Face:	West Face:	Yes	No
Single Entry Doors	---	---	---	---		
Double Entry Doors	---	---	---	---	<input type="checkbox"/>	<input type="checkbox"/>
Sliding Glass (Ground Floor)	---	---	---	---		
Sliding Glass (Upper Floors)	---	---	---	---		
Single Car Garage	---	---	---	---	<input type="checkbox"/>	<input type="checkbox"/>
Double Car Garage	---	---	---	---	<input type="checkbox"/>	<input type="checkbox"/>

Door Damage Index

1 = damage to glazing
 2 = door broken open - latch
 3 = frame failure

Cathedral Ceiling: Yes No

Type of System or Connection	Damage Index
Roof to Wall Connection	---
Intermediate Floor Connection	---
Foundation Connection	---
Lateral Bracing System Failure	---
Foundation Failure	---
Gable Endwall Failure	<input type="checkbox"/> Balloon Framing <input type="checkbox"/> Platform Framing
Roof Overhang Failure	length _____ connection _____

Connection or Component / System Damage Index

0 = None
 1 = Cracks
 2 = Open Gaps
 3 = Partial Failure
 4 = Total Failure

Type of Connection

7 = Unknown
 0 = Gravity / Friction
 1 = Nails
 2 = Screws
 3 = Bolts / Anchor Bolts
 4 = Adhesive / Epoxy
 5 = Straps
 6 = Straps and Nails