



Damage Assessment Form

Complete this form to report serious damage to property not eligible for the catastrophic event refund as outlined in Florida Statute 197.319.

Property Owner Name		
Phone Number		
Email		
Property Address		
Parcel Identification Number		
Date Event Occurred		
Describe Event (Flood, Fire, etc.)		
Description of Damages:		
Attached Documents and Photos		
Condition of Property as of January 1 after damages occurred		
<i>I declare that the facts stated on this form are true to the best of my knowledge and belief.</i>		
Signature of Property Owner	Date	
<i>Official Use Only</i>		
Field Review Notes:		
Activity Log #	Initials	Date