

FEDERAL EMERGENCY MANAGEMENT AGENCY <b>PRELIMINARY DAMAGE ASSESSMENT SITE ESTIMATE</b>			DATE	
<b>PART I — APPLICANT INFORMATION</b>				
COUNTY	NAME OF APPLICANT	NAME OF LOCAL CONTACT	PHONE NO.	
		<i>Bill Gaylord</i>		
<b>PART II — SITE INFORMATION</b>				
KEY FOR DAMAGE CATEGORY (Use appropriate letters in the "category" blocks below)				
a. DEBRIS REMOVAL	d. WATER CONTROL FACILITIES		g. OTHER (Parks, Recreational Facilities, etc.)	
b. PROTECTIVE MEASURES	e. PUBLIC BUILDINGS			
c. ROADS AND BRIDGES	f. PUBLIC UTILITIES			
SITE NO.	CATE-GORY	LOCATION (Use map location, address, etc.)		
		<i>NORTH HIGH</i>		
DESCRIPTION OF DAMAGE				
<i>03-202</i>				
<b>FSS 119.071*</b>				
IMPACT:			% COMPLETE	COST ESTIMATE
SITE NO.	CATE-GORY	LOCATION (Use map location, address, etc.)		
DESCRIPTION OF DAMAGE				
<i>08-204</i>				
<b>FSS 119.071*</b>				
IMPACT:			% COMPLETE	COST ESTIMATE
SITE NO.	CATE-GORY	LOCATION (Use map location, address, etc.)		
DESCRIPTION OF DAMAGE				
IMPACT:			% COMPLETE	COST ESTIMATE
SITE NO.	CATE-GORY	LOCATION (Use map location, address, etc.)		
DESCRIPTION OF DAMAGE				
IMPACT:			% COMPLETE	COST ESTIMATE
NAME OF INSPECTOR		AGENCY	OFFICE PHONE NO.	HOME PHONE NO.

\*In accordance with FSS 119.071: Security/Firesafety system plans and information are exempt from public