FEDERAL EMERGENCY MANAGEMENT AGENCY								DATE	
PRELIMINARY DAMAGE ASSESSMENT SUMMARY REPORT								1/0/00	
PART I - APPLICANT / INSPECTOR INFORMATION									
COUNTY	NTY APPLICANT APPLICANT CONTACT / E-MAIL							PHONE	
0 0						•		0	
INSPECTORS/AGENCY:					E-MAIL			PHONE	
Local 0					0			0	
State 0 Federal 0					0			0	
PART II - BUDGET & COST ESTIMATE-SUMMARY (Complete Category Pages First THIS IS REQUIRED)								<b>°</b>	
POPULA	TION	TOTAL BUDGET						DATE FY BEGINS	
I OI OLATION		Approved	Balance	Approved		Balance	DATETT BEGING		
CATE-	NO. OF				TOTAL CATEGORY		TOTAL CATEGORY	POTENTIAL LOCAL	
GORY	SITES	TYPES OF DAMAGE			ESTIMATE - APPLICANT		ESTIMATE - TEAM	FUNDS AVAILABLE	
А		Debris Clearance			\$0 \$0			\$0	
В		Protective Measures						\$0	
С		Road Systems				\$0	\$0	\$0	
D		Water Control Facilities				\$0	\$0	\$0	
Е		Public Buildings and Equipment				\$0	\$0	\$0	
F		Public Utilities				\$0	\$0	\$0	
G		Parks/Other				\$0	\$0	\$0	
9					TOTAL	<b>\$</b> 0		TOTAL	
					\$0		\$0		
Damage	Cost Estima	te - Corps of			Damage C	ost Estimate - NF		· · ·	
Engineers=							Concentration Convice		
Damage Cost Estimate - FHWA= NRCS = National Resource Conservation Service FHWA = Federal Highway Administration									
PART III - OVERALL DISASTER IMPACT (Use Additional Sheets if Necessary) THIS IS REQUIRED INFORMATION.									
A. <u>GENERAL IMPACT:</u>									
1. Identify and describe the damages that constitute a health and/or safety hazard to the general public.									
2. Describe the population adversely affected directly or indirectly by the loss of or the damage to these public facilities.									
3. What economic activities are adversely affected by the loss of the public facilities or the damage to the facilities?									
B. <u>RESP</u>	ONSE CAPA	BILITY:							
1. Describe how the applicant intends to repair the damage and the schedule to accomplish the work.									
2. Describe the source and availability of funds to accomplish the repairs.									
3. How quickly can the damages be repaired without degradation of public services?									
4. Date and cause of damage (auto-filled).									
C. IMPA	CT ON PUBL	C SERVICES	IF A DECLAR	ATION IS NOT MADE: (	e.g.,Defer pe	ermanent repairs, i	mpact ongoing services, in	mprovements, etc.)	