

HURRICANE INTAKE FORM

Has your home been affected by a hurricane/tropical storm? 🗹 Y 🗌 N
Do you carry homeowner's insurance? 🗹 Y 🔲 N
If yes, who is your carrier?
Do you carry flood insurance? 🔲 Y 🗹 N
Did you file a claim? Y Y N If yes, with who? Flood Homeowners Both
Has the claim(s) been closed? 🗹 Y 🗌 N If yes, were you paid out? 🗹 Y 🗍 N No Insurance Claims made
Have you performed any repairs? Y 🛛 N If yes, please outline repairs below:

Repair Description	Company Contracted	Date of Completion
pool cage screens repaired		completed
minor soffit/gutter repair		completed

Were there any permits pulled for repairs? 🔲 Y 🗹 N	
If yes, have they been closed out? Y 🛛 N No permits pulled after Hurricane la	n
Do you have receipt(s) of repairs performed? 🛛 🛛 Y 🗹 N	
Are there outstanding repairs scheduled to be performed? 🛛 🔲 Y 🗹 N	
Are there any repairs not scheduled to be performed? If yes, outline repairs below:	