

## AGENCY DISCLOSURE NOTICE

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## COASTAL STORM DAMAGE

### Background Information

1. Is this your primary residence?

1. NO

YES

1a. If not, is it a... (CIRCLE ONE ANSWER)

1. Second Home

2. Rental

3. Other (PLEASE SPECIFY) \_\_\_\_\_

2. How many years have you owned this house?

\_\_\_\_\_ YEARS

3. How old is your home?

\_\_\_\_\_ YEARS OLD

4. Approximately how many times has your home had coastal storm damage since you've lived here, including Hurricane     (Name)     or the coastal storm of     (date)    ?

\_\_\_\_\_ TIMES

5. Where is your home situated? (CHECK ONE)

\_\_\_\_\_ Oceanfront, if so how many feet is your home from the ocean at mean high water line?

- \_\_\_\_\_ Feet
- \_\_\_\_\_ First row behind oceanfront
  - \_\_\_\_\_ Ocean block (Within a block of the ocean)
  - \_\_\_\_\_ On a sound or back bay
  - \_\_\_\_\_ Interior, (More than a block from the ocean bay, or sound)

### Structural and Outside Property Data

6. Not counting your attic, garage, or the under portion of an elevated building how many square feet of living area are in your home? (If you are unsure, please give the dimensions.)

\_\_\_\_\_ SQUARE FEET or ( \_\_\_\_\_ FEET X \_\_\_\_\_ FEET)

7. What type of foundation does your home have?

(PLEASE CIRCLE ONE ANSWER AND INDICATE NUMBER OF FEET, WHERE APPROPRIATE)

1. Slab

2. Piling - If piling, how many feet do they go below ground? \_\_\_\_\_ Feet

3. How many feet do they elevate the structure above ground? \_\_\_\_\_ Feet

4. Concrete Block –

If so, how many feet do they go below ground? \_\_\_\_\_ Feet

5. Other type of foundation, please describe.

\_\_\_\_\_

8. If you have an elevated building, is there an under-the-house enclosure?

(CIRCLE YES OR NO)

YES                      NO

If yes, please indicate the size of enclosed area devoted to each of the following uses:

8a. Finished living area: \_\_\_\_\_ SQUARE FEET or ( \_\_\_\_\_ FEET X \_\_\_\_\_ FEET)

8b. Utility space \_\_\_\_\_ SQUARE FEET or ( \_\_\_\_\_ FEET X \_\_\_\_\_ FEET)

8c. Garage: \_\_\_\_\_ SQUARE FEET or ( \_\_\_\_\_ FEET X \_\_\_\_\_ FEET)

8d. Other: Please describe: \_\_\_\_\_

\_\_\_\_\_ SQUARE FEET or ( \_\_\_\_\_ FEET X \_\_\_\_\_ FEET)

9. Do you have an attached garage that is not under the house?

(CIRCLE YES OR NO) YES NO

9a. If so, indicate the size of the attached garage.

\_\_\_\_\_ SQUARE FEET or ( \_\_\_\_\_ FEET X \_\_\_\_\_ FEET)

10. Do you have a detached garage that is not under the house?

(CIRCLE YES OR NO) YES NO

10a. If so, indicate the size of the detached garage.

\_\_\_\_\_ SQUARE FEET or ( \_\_\_\_\_ FEET X \_\_\_\_\_ FEET)

11. What category best describes the style of this building?

(CIRCLE ONE ANSWER)

- |                |                           |                            |
|----------------|---------------------------|----------------------------|
| 1. One-Story   | 5. 1-1/2 Story Finished   | 9. 3-1/2 Story Finished    |
| 2. Two-Story   | 6. 1-1/2 Story Unfinished | 10. 3-1/2 Story Unfinished |
| 3. Three-Story | 7. 2-1/2 Story Finished   | 11. Bi-Level               |
| 4. Split Level | 8. 2-1/2 Story Unfinished |                            |

12. Not counting any basement, attic, or garage, how many square feet of living area are in your home? (If respondent is unsure, ask for the dimensions and calculate.)

\_\_\_\_\_ SQUARE FEET

13. Does your home have a basement? (CIRCLE)

- 1. NO (Skip to 14)
- 2. YES

13a. If yes, please indicate the total basement area, in square feet, and the amount that is finished and unfinished? (If respondent is unsure, ask for the dimensions and calculate.)

TOTAL BASEMENT AREA: \_\_\_\_\_ SQUARE FEET

FINISHED BASEMENT AREA: \_\_\_\_\_ SQUARE FEET

UNFINISHED BASEMENT AREA: \_\_\_\_\_ SQUARE FEET

14. Do you have a carport? (CIRCLE)

1. NO
2. YES

14a. How large is the carport in square feet? (If respondent is unsure, ask for the dimensions and calculate.)

\_\_\_\_\_ SQUARE FEET

15. What category best describes the heating and cooling system in this building?

(CIRCLE ONE ANSWER FOR MOST PROMINENT SYSTEM)

Heating Only:

- |                                    |                              |
|------------------------------------|------------------------------|
| 1. Forced Air                      | 6. Ceiling, Radiant Electric |
| 2. Gravity Furnace                 | 7. Baseboard, Electric       |
| 3. Floor Furnace                   | 8. Baseboard, Hot Water      |
| 4. Wall Furnace<br>(No Heat Ducts) | 9. Radiators, Hot Water      |
| 5. Floor, Radiant Hot Water        | 10. Radiators, Steam         |

Heating and Cooling:

11. Warmed and Cooled Air
12. Heat Pump System

Cooling Only:

13. Evaporative Water Cooler (Single or Short Ducts)
14. Refrigerated, with Condenser and Ducts

16. What is the primary exterior wall covering on this building?

(CIRCLE ONE ANSWER)

- |                        |                      |                    |
|------------------------|----------------------|--------------------|
| 1. Plywood             | 4. Siding            | 7. Common Brick    |
| 2. Hardboard<br>Sheets | 5. Shingle           | 8. Face Brick      |
| 3. Stucco              | 6. Masonry<br>Veneer | 9. Stone           |
|                        |                      | 10. Concrete Block |

17. What is the primary roof covering of this building? (CIRCLE ONE ANSWER)

- |  |                     |                  |
|--|---------------------|------------------|
| 1. Composition Shingle                   | 5. Concrete Tile    | 10. Plastic Tile |
| 2. Built-up Rock                         | 6. Clay Tile        |                  |
| 3. Wood Shingle<br>(Embedded in Asphalt) | 7. Galvanized Metal |                  |
| 4. Wood Shake                            | 8. Slate            |                  |
|  | 9. Composition Roll |                  |

18. How many fireplaces are in this home? \_\_\_\_\_ FIREPLACES

\_\_\_\_\_ FIREPLACES

19. How many square feet of each of the following types of porches are there in this home? (If you are unsure of square feet, please give dimensions.)

Slab \_\_\_\_\_ SQUARE FEET  
Or ( \_\_\_\_\_ Feet X \_\_\_\_\_ Feet)

Slab with Roof \_\_\_\_\_ SQUARE FEET  
Or ( \_\_\_\_\_ Feet X \_\_\_\_\_ Feet)

Wood Deck \_\_\_\_\_ SQUARE FEET  
Or ( \_\_\_\_\_ Feet X \_\_\_\_\_ Feet)

Enclosed Slab Porch \_\_\_\_\_ SQUARE FEET  
Or ( \_\_\_\_\_ Feet X \_\_\_\_\_ Feet)

Enclosed Wood Porch \_\_\_\_\_ SQUARE FEET  
Or ( \_\_\_\_\_ Feet X \_\_\_\_\_ Feet)

20. Do you have an elevator in your home?

\_\_\_ Yes \_\_\_ No

21. How high is the first floor of your building above the lowest adjacent grade?

\_\_\_\_\_ FEET

22. How high is the first floor of your building above the where flood water would first enter your building (from considering windows and pipes into the foundation?)

\_\_\_\_\_ FEET

23. Please note any long-term flood proofing method, which may be used on this property.

**(PLEASE CIRCLE YES OR NO FOR EACH COLUMN.)**

Long-Term Flood Proofing Methods	Original Construction		Retrofitted (after original construction)		Was Method Effective?	
	YES	NO	YES	NO	YES	NO
Elevated Construction	YES	NO	YES	NO	YES	NO
Reinforced piling	YES	NO	YES	NO	YES	NO
Extended piling	YES	NO	YES	NO	YES	NO
Bracing	YES	NO	YES	NO	YES	NO
Sealant or Shield	YES	NO	YES	NO	YES	NO
What type? _____						

24. Please indicate 1) which utilities are elevated in your home in order to prevent flood damage and 2) indicate whether the elevating was effective:

**(PLEASE CIRCLE YES OR IN BOTH COLUMNS.)**

Utility	Elevated		Was method effective?		
	Yes	No	Yes	No	N/A
Air Conditioner	Yes	No	Yes	No	N/A
Furnace	Yes	No	Yes	No	N/A
Washer/Dryer	Yes	No	Yes	No	N/A
Water Heater	Yes	No	Yes	No	N/A
Other:	Yes	No	Yes	No	N/A

25. Other than in the under-the-house enclosure, do you have a garage on this property?  
(CIRCLE)
1. NO (Skip to 26)
  2. YES

25a. Is the garage attached to the structure? (CIRCLE)

1. NO
2. YES

25b. How large is the garage in square feet? (If you are unsure, please give the dimensions.)

\_\_\_\_\_ SQUARE FEET Or ( \_\_\_\_\_ Feet X \_\_\_\_\_ Feet)

26. How high is the first floor of your building above the lowest adjacent grade?

\_\_\_\_\_ FEET

### **COSTS AND DAMAGES**

The next group of questions is to determine damages to different types of property from the Hurricane  (NAME)  or the coastal storm of (  DATE  ).

27. Please indicate how high (in feet and inches) did any standing water in your home reach relative to the first floor of your home?

\_\_\_\_\_ FEET; \_\_\_\_\_ INCHES (ABOVE, BELOW) FIRST FLOOR LEVEL  
[CIRCLE]

28. Please indicate how high in feet and inches did any waves reach relative to the first floor of your home?

\_\_\_\_\_ FEET; \_\_\_\_\_ INCHES (ABOVE, BELOW) FIRST FLOOR LEVEL  
[CIRCLE]

29. Please indicate the primary source of damage to your home, excluding wind damage?  
(CIRCLE ONE)

1. STORM SURGE (a sudden flow of water associated with a storm event)
2. WAVE RUNUP (the rush of water up a structure, associated with the breaking of a wave)
3. INUNDATION (the buildup of water overflow or ponding)
4. EROSION
5. OTHER \_\_\_\_\_

30. Did the flooding from this storm make it necessary for you or other occupants of your home to stay in temporary residence due to evacuation or while your home was being repaired?

(CIRCLE)

1. NO (Skip to 31)

2. YES

30a. How many days did you or other occupants of your home to spend in temporary residence due to the evacuation or while flood damage to your home was being repaired?

\_\_\_\_\_ DAYS

30b. How much money did your household spend beyond your normal travel expense, on travel and lodging due to your evacuation(s) during Hurricane (Name) ?

\_\_\_\_\_ DOLLARS

30c. Due to your evacuation, how much money did your household spend on food in excess of what you normally would have spent?

\_\_\_\_\_ DOLLARS

31. Was there erosion damage to your lot?

31a. If so, how many square feet of your lot were eroded?

\_\_\_\_\_ Square Feet?

31b. What percentage of the lot directly under your home (footprint of your home) was eroded?

\_\_\_\_\_ Percent

31c. What were the total costs to repair the erosion damage to your lo/t and your home?

\$ \_\_\_\_\_



32. For each motor vehicle, (including sedan, vans, sports utility, sports cars, station wagons, pickup trucks, boats, jet skis, golf carts, and motorcycles) located at this residence during the flood, please indicate the dollar value, whether or not it was moved, the dollar amount of damage to the vehicle, if any, and the level, in feet and inches, that the flood water reached above the bottom of the vehicle's wheels.

<p style="text-align: center;">Motor Vehicle Category and Year</p> <p>(Categories include: sedan, vans, sports utility, sports cars, station wagons, pickup trucks, boats, jet skis, golf carts, and motorcycles)</p>	<p style="text-align: center;">Dollar Value</p>	<p style="text-align: center;">Was it Moved to a safe location?  (CIRCLE YES OR NO)</p>	<p style="text-align: center;">Dollar Damage</p>	<p style="text-align: center;">Depth of Water from the Bottom of the Vehicle</p>
<p>Vehicle 1:</p>	<p>\$_____</p>	<p>YES   NO</p>	<p>\$_____</p>	<p>_____ FEET</p>
<p>Vehicle 2:</p>	<p>\$_____</p>	<p>YES   NO</p>	<p>\$_____</p>	<p>_____ FEET</p>
<p>Vehicle 3:</p>	<p>\$_____</p>	<p>YES   NO</p>	<p>\$_____</p>	<p>_____ FEET</p>

The following questions are to determine the dollar cost and unpaid hours for repair and cleanup of your home, and repair, replacement, and cleanup to the contents of your home that resulted from Hurricane (NAME).

33. What was the cost of the structural damage to your home? (Structural damage is defined as damage to any building components, including foundation, walls, floors, windows, roof, electrical systems, heating and cooling systems, plumbing, attached carpeting, attached shelves and cabinets, and built-in equipment and appliances.)

\$ \_\_\_\_\_ DOLLAR COSTS OF STRUCTURE DAMAGE

33a. Which of the following is the primary source of your structure damage repair costs?

(Circle one)

- a. Contractor estimate (before repairs)
- b. Contractor invoice (after repairs)
- c. Your own assessment
- d. Other \_\_\_\_\_

33b. What was the dollar cost to you for labor and supplies to clean up your home after the hurricane?

\$ \_\_\_\_\_

33c. What was the total number of unpaid hours that you and others spent on repair and cleanup to your home?

\_\_\_\_\_ UNPAID HOURS

34. Please itemize your total structural damages and any additional time that was spent on repairs other than paid labor hours into the following categories.

Portion of Structure	Value of Damages		Unpaid Hours to repair or install, <b>in addition</b> to \$ spent
	In % of total Or in Dollars		
1. Built-in shelves and appliances	_____ %	\$ _____	_____ UNPAID HOURS
2. Electrical	_____ %	\$ _____	_____ UNPAID HOURS
3. Plumbing	_____ %	\$ _____	_____ UNPAID HOURS
4. Exterior walls, windows, doors (painting included), and roofing	_____ %	\$ _____	_____ UNPAID HOURS
5. Footings and foundation	_____ %	\$ _____	_____ UNPAID HOURS
6. Interior doors and walls (painting included)	_____ %	\$ _____	_____ UNPAID HOURS
7. Interior floors, carpet and ceilings	_____ %	\$ _____	_____ UNPAID HOURS
8. Mechanical systems - heat, A/C, sump pump, built-in vacuum	_____ %	\$ _____	_____ UNPAID HOURS
9. Porches and decks	_____ %	\$ _____	_____ UNPAID HOURS
10. Chimneys and	_____ %	\$ _____	_____ UNPAID HOURS

fireplaces			
11. Garages and outbuildings	_____ %	\$ _____	_____ UNPAID HOURS
12. Outside property and landscaping	_____ %	\$ _____	_____ UNPAID HOURS
13. Septic, sewer, and water systems	_____ %	\$ _____	_____ UNPAID HOURS
Total	100 %	\$ _____	_____ UNPAID HOURS

35. What was the dollar damage to the contents of your home, garage, and shed, excluding motor vehicles? (Only include content replacement and repairs. Do not include repairs to the structure of the house).

\$ \_\_\_\_\_

**(Content damage refers to damage to personal property kept inside the home or the garage that is not permanently affixed to the home.)**

36. What was the total number of unpaid hours that you and others spent on repair of appliances, furniture, and other contents of your home?

\_\_\_\_\_ UNPAID HOURS

37. How much, if anything, did each of the following cost you in actual dollar expenditures as a result of Hurricane (NAME) ?

a) Costs for moving furniture and other belongings? \$ \_\_\_\_\_

b) Costs for storing furniture and other belongings? \$ \_\_\_\_\_

c) Vandalism, looting, or theft costs? \$ \_\_\_\_\_

d) Costs from flooding-related medical problems? \$ \_\_\_\_\_

e) Any other costs due to Hurricane \_\_\_\_\_ \$ \_\_\_\_\_

Describe: \_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

38. Is there a swimming pool on your lot?

\_\_\_ Yes    \_\_\_ No, Go to Question 39

38a. Was your swimming pool damaged by Hurricane  (NAME) ?

\_\_\_ Yes    \_\_\_ No, Go to Question 39

38b. What were your repair costs from Hurricane  (NAME)  associated with your swimming pool? (If the pool was destroyed, please estimate the replacement cost.)

\$ \_\_\_\_\_ SWIMMING POOL REPAIR COSTS

38c. What are the dimensions of your swimming pool?

Size                        Range of Depth   
\_\_\_ feet X \_\_\_ feet      \_\_\_ feet at shallowest point      \_\_\_ feet at deepest point

38d. Is your swimming pool on the oceanfront side of your home?

\_\_\_ Yes    \_\_\_ No

39. List any additional features, such as hot tub, tile works, etc. that may have been damaged by Hurricane  (NAME) .

<u>Item</u>	<u>\$ Damage</u>	<u>CIRCLE N/A, IF NOT</u>
<u>APPLICABLE</u>		
HOT TUB	\$ _____	<u>N/A</u>
TILE WORK	\$ _____	<u>N/A</u>
DECKING	\$ _____	<u>N/A</u>
OTHER (SPECIFY _____)	\$ _____	<u>N/A</u>

## Flood Warning and Response

40. Just before  (DATE)  storm, how did you first become aware that flooding might reach your business? **(CIRCLE ONE ANSWER)**

1. E-MAIL
2. TEXT MESSAGE
3. SOCIAL NETWORKING WEBSITE (FACEBOOK, TWITTER, SNAPCHAT, etc.)
4. TV
5. RADIO
6. TELEPHONE BY A PUBLIC OR EMERGENCY WORKER
7. TELEPHONE BY OTHER
8. FACE TO FACE BY PUBLIC OR EMERGENCY WORKER
9. FACE TO FACE BY OTHER
10. LOUDSPEAKER
11. SIREN
12. C.B., HAM RADIO or POLICE SCANNER
13. NEWSPAPER
14. OBSERVING THE CREEK OR RIVER WATER LEVELS
15. OTHER \_\_\_\_\_

41. How many hours were there between the time you first became aware that flooding might reach your property until when the water actually reached your property?

\_\_\_\_\_ HOURS

42. What actions, if any, did you take to safeguard your business property immediately prior to flooding and what were the dollar damages prevented by each action?

**(PLEASE CIRCLE YES OR NO FOR EACH ACTION LISTED BELOW AND INDICATE THE DOLLARS DAMAGES PREVENTED FOR EACH ACTION.)**

<b>DAMAGE PREVENTIVE ACTION</b>	<b>TOOK PREVENTIVE ACTION</b>	<b>DOLLAR DAMAGE PREVENTED (PLEASE FILL IN \$ DAMAGES PREVENTED OR CIRCLE DK FOR DON'T KNOW.)</b>
1. Moved contents to higher ground	YES      NO	\$ _____ OR      DK
2. Elevated contents to a higher spot in the building	YES      NO	\$ _____ OR      DK
3. Shut off electrical equipment	YES      NO	\$ _____ OR      DK
4. Sandbagged the outside of the building	YES      NO	\$ _____ OR      DK
5. Used another type of temporary barrier	YES      NO	\$ _____ OR      DK
6. Moved vehicles to higher ground	YES      NO	\$ _____ OR      DK
7. Other action _____ _____	YES      NO	\$ _____ OR      DK
8. None	YES      NO	

43. Emergency Measures/Plans:

43a. What emergency measures/plans, if any, would you take to reduce damage if you were forewarned of another coastal storm? \_\_\_\_\_

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43b. What is your estimated cost to implement these emergency measures?

\$\_\_\_\_\_

43c. How much time (in man hours) is required to implement these emergency measures?

\_\_\_\_\_ MAN HOURS