

# Assessment Check List

Parcel ID#	Damage Address	City	Zip Code
FL-034	154 Temple Ave.	Riverhead	11901
	Provide Site Signage	Yes	No
		<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Maintain Landscaping	Yes	No
		<input checked="" type="checkbox"/>	<input type="checkbox"/>
		Current condition	Normal
		<input type="checkbox"/>	<input checked="" type="checkbox"/>
		High	Good
		<input type="checkbox"/>	<input type="checkbox"/>
		Bad	
		<input type="checkbox"/>	<input type="checkbox"/>
	Clean Out Debris	Yes	No
		<input checked="" type="checkbox"/>	<input type="checkbox"/>
		Hand	Yes
		<input type="checkbox"/>	<input checked="" type="checkbox"/>
		No	
		<input type="checkbox"/>	<input type="checkbox"/>
		Machine	Yes
		<input type="checkbox"/>	<input type="checkbox"/>
		No	
		<input type="checkbox"/>	<input checked="" type="checkbox"/>
		Both	
		<input type="checkbox"/>	<input type="checkbox"/>
	Install Fencing	Yes	No
		<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Board Up Doors/Windows	Yes	No
		<input checked="" type="checkbox"/>	<input type="checkbox"/>
		Front	Left
		<input type="checkbox"/>	<input type="checkbox"/>
		Rear	Right
		<input type="checkbox"/>	<input type="checkbox"/>
		All	
		<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Verify Status of Utilities	Gas	On
		<input type="checkbox"/>	<input checked="" type="checkbox"/>
		Off	
		<input type="checkbox"/>	<input type="checkbox"/>
		Electric	On
		<input type="checkbox"/>	<input checked="" type="checkbox"/>
		Off	
		<input type="checkbox"/>	<input type="checkbox"/>
		Oil	Yes
		<input type="checkbox"/>	<input type="checkbox"/>
		No	
		<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Miscellaneous Site Work	Notes:	N/A
	Remove Standing Water	Standing Water	Yes
		<input type="checkbox"/>	<input type="checkbox"/>
			No
			<input checked="" type="checkbox"/>
	Drainage Issues	Drainage Issues	Yes
		<input type="checkbox"/>	<input type="checkbox"/>
			No
			<input checked="" type="checkbox"/>
	Pest/Vermin Control	Roaches	Bats
		<input type="checkbox"/>	<input type="checkbox"/>
		NO	NO
		Rats	Other: Explain
		<input type="checkbox"/>	<input type="checkbox"/>
		NO	NO
	Structural Integrity	Good	Bad
		<input type="checkbox"/>	<input type="checkbox"/>
			Demolish
			<input checked="" type="checkbox"/>
	Habitual with Minor Clean up	Yes	No
		<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Hazardous/ Environmental Material Abatement	Notes:	NO
	Verify Status of Bulkheads	Yes	No
		<input type="checkbox"/>	<input type="checkbox"/>
			N/A
	Provide Security Personnel	Yes	No
		<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Notes:	No pest control on-site. Detached shed on-site. Detached shed on-site	

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1 front elevation  
Date Taken: 7/21/2014  
Taken By: Brook Benvenuti



2 street right  
Date Taken: 7/21/2014  
Taken By: Brook Benvenuti



3 street left  
Date Taken: 7/21/2014  
Taken By: Brook Benvenuti



4 address  
Date Taken: 7/21/2014  
Taken By: Brook Benvenuti



5 entry sign  
Date Taken: 7/21/2014  
Taken By: Brook Benvenuti



6 warning sign  
Date Taken: 7/21/2014  
Taken By: Brook Benvenuti



7 entry sign  
Date Taken: 7/21/2014  
Taken By: Brook Benvenuti



8 front yard  
Date Taken: 7/21/2014  
Taken By: Brook Benvenuti



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9 front elevation  
Date Taken: 7/21/2014  
Taken By: Brook Benvenuti



10 left yard  
Date Taken: 7/21/2014  
Taken By: Brook Benvenuti



11 left elevation  
Date Taken: 7/21/2014  
Taken By: Brook Benvenuti



12 gas meter  
Date Taken: 7/21/2014  
Taken By: Brook Benvenuti



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13 rear shed  
Date Taken: 7/21/2014  
Taken By: Brook Benvenuti



14 rear yard  
Date Taken: 7/21/2014  
Taken By: Brook Benvenuti





15 rear elevation  
Date Taken: 7/21/2014  
Taken By: Brook Benvenuti



16 right yard  
Date Taken: 7/21/2014  
Taken By: Brook Benvenuti



17 right rear elevation  
Date Taken: 7/21/2014  
Taken By: Brook Benvenuti



18 right elevation  
Date Taken: 7/21/2014  
Taken By: Brook Benvenuti



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19 power meter  
Date Taken: 7/21/2014  
Taken By: Brook Benvenuti

