

Assessment Check List

Parcel ID#	Damage Address	City	Zip Code
FL-104	27 Pine 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"/>
	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"/>
		Machine	Yes
		<input type="checkbox"/>	<input type="checkbox"/>
		No	<input checked="" type="checkbox"/>
		Both	<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 checked="" type="checkbox"/>
	Verify Status of Utilities	Gas	On
		<input type="checkbox"/>	<input checked="" type="checkbox"/>
		Off	<input type="checkbox"/>
		Electric	On
		<input type="checkbox"/>	<input checked="" type="checkbox"/>
		Off	<input type="checkbox"/>
		Oil	Yes
		<input type="checkbox"/>	<input type="checkbox"/>
		No	<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.	

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



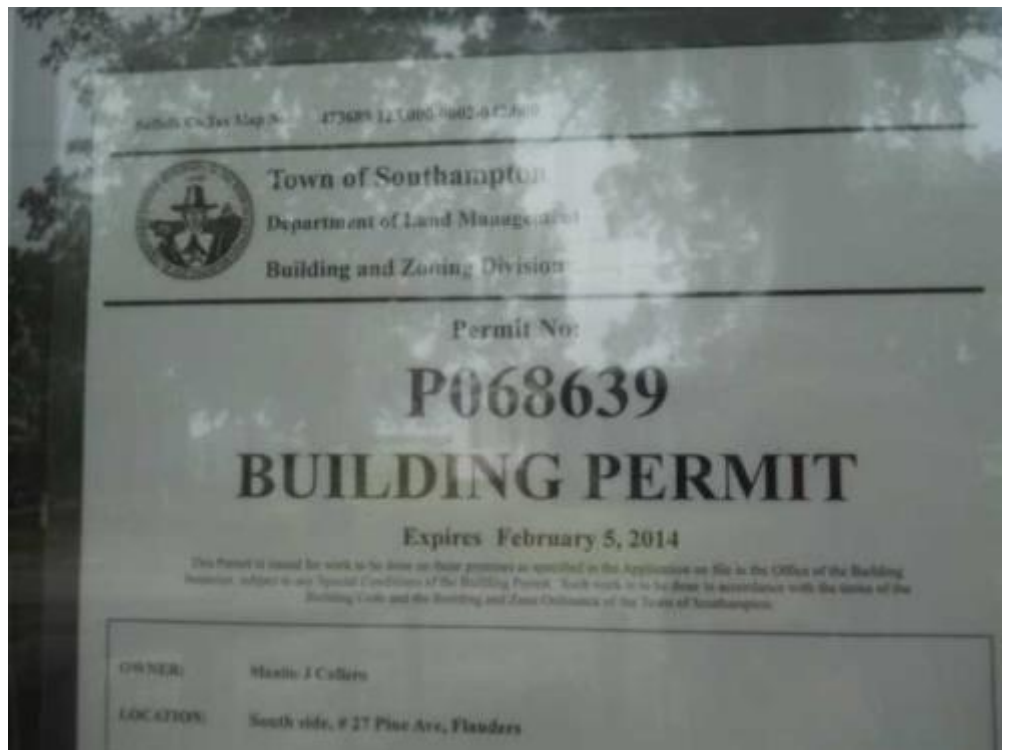
4 address
Date Taken: 7/21/2014
Taken By: Brook Benvenuti



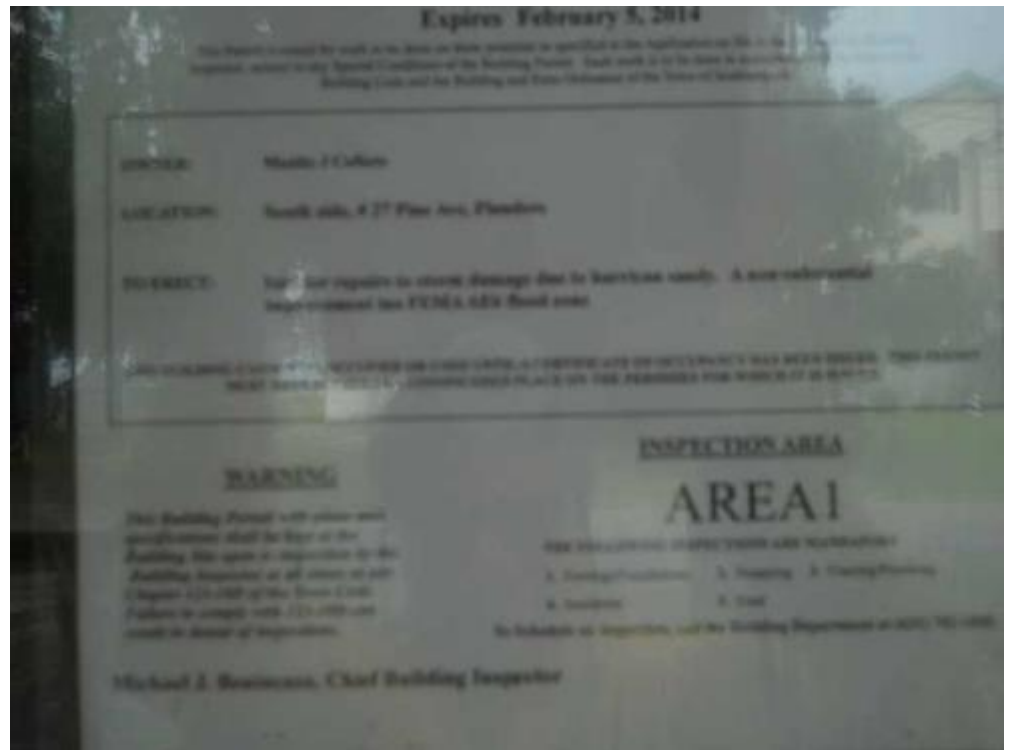
- 5 front signs
Date Taken: 7/21/2014
Taken By: Brook Benvenuti



- 6 permit
Date Taken: 7/21/2014
Taken By: Brook Benvenuti



7 permit
Date Taken: 7/21/2014
Taken By: Brook Benvenuti



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



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



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



11 rear yard and shed
Date Taken: 7/21/2014
Taken By: Brook Benvenuti



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



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



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



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



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



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



18 electric meter
Date Taken: 7/21/2014
Taken By: Brook Benvenuti

