

Address:

Owner Name:

Resident Name:

Contact Information (Email/Phone Number):

Time Flooding noticed:

Is there any damages or loss as a result of the rain event (drywall, carpet...etc.)? Please describe:

Has there been any issues as a result of rain events at the residence before?

Is there a weeping tile and sump pump at the residence?

If Yes, was it functioning properly?

Is there a backwater device on the sewer connection? (Yes/no/unclear)

Are you aware of if it has been tested or maintained?

Have you contacted your insurance provider regarding this matter? (Yes/no)