

As the applicant you are the: (Please select one)

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OProperty Owner(s)	When did the event occur? yyyy-mm-dd		
◯ Tenant			
Applicant Information			
First Name	Last Name		
Mailing Address (full street address or P.O. Box)	City or Town	Province Postal Code	
Email Address	Phone		
Co-Applicant Information			
First Name	Last Name		
Mailing Address (full street address or P.O. Box)	City or Town	Province Postal Code	
Email Address	Phone	_	
Damaged Property Address			
Same as Applicant Mailing Address Above Address Below	,		
Address (full street address)			
Are there any tenants living at the property? \bigcirc Yes \bigcirc No			
Property Information			
Do you have any of the following? (check all that apply)			
Backflow Device? Weeping Tile? Sump Pump?			
Other (please specify)			

If yes to any of the above, when were they last maintained? Did they function properly?

If yes to Weeping Tile and/or Sump Pump, are you aware of the discharge location? (outside of home, to storm drain, tied to sewer line etc.)

How did the water enter your home? (check all that apply)

Overland Flooding	Seepage
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Sewer back-up

Other (please specify)

How much water was in the affected home?

Loss and Damage Description

Please note - It is important to take photos, keep receipts and contact your insurance as soon as possible. Please summarize what happened. How did the water enter your property and what was affected?

Clean up	Have you been able to clean up?	◯Yes	◯ No
	If not, why?		
Lodging	Were you or are you currently displaced?	⊖Yes	⊖ No
	If yes, for how long?		
ears Effected	To your knowledge, has your property been effected in the past? If yes,what year(s)?	⊖Yes	⊖ No
	Please submit completed forms to flood@edson.ca		Page 2 of