

CITY OF PRAIRIE VIEW

Flood Survey 2016 Home Flooding Report

1.	First name
2.	Last name
3.	Primary telephone number
4.	Secondary telephone number
_	
5.	Email Address (if available)
	Flooded facility
0.	Flooded facility O Home
	O Business
	Other
	Other
7	Address of damaged/flooded location
, ·	Truit ess of damagewriooded focusion
8.	Date facility damaged
	Month Day
9.	Approximately how much water was in your facility?
	O Less than 1 inch
	O Between 1 inch and 6 inches
	O Between 6 inches and 12 inches
	O More than 12 inches
10. If not flooded, describe any damage other than flooding	

Office: (936) 857-3711 Fax: (936) 857-5836 www.prairieviewtexas.gov