



**Data Collection Tool | Disaster Relief Fund**

**Household Information**

Household Identifier: \_\_\_\_\_

Household Size: \_\_\_\_\_

*(Household identifier should include head of household first initial, last initial, and birth year; JD 1900.)*

Household Member	Age

Do any members of the household have special needs? \_\_\_\_\_

Estimated household income: \_\_\_\_\_

Post-disaster housing situation: \_\_\_\_\_

Other: \_\_\_\_\_

**Property Information**

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

County: \_\_\_\_\_

Property Type: \_\_\_\_\_

If owner occupied, is the property insured? \_\_\_\_\_

Estimated Property Value: \_\_\_\_\_

Desired housing outcome: \_\_\_\_\_

Estimated Repair Costs: \_\_\_\_\_

**Assistance Information**

Was the household able to be assisted with DRF funds? \_\_\_\_\_

If no, please specify: \_\_\_\_\_

Other: \_\_\_\_\_

**Agency Information**

Agency Name: \_\_\_\_\_

Grant Number: \_\_\_\_\_

Completed by DRF Staff Member: \_\_\_\_\_

Date: \_\_\_\_\_