



Village of Willowbrook Initial Damage Assessment

Nature of Incident: _____ Date of Occurrence: _____

Your Name: _____

Address: _____

Home Phone: _____ Cell Phone: _____

E-mail Address: _____

Type of Structure: ☐ Single-Family Residence ☐ Multi-Family Residence
☐ Business ☐ Other: _____

Are you the homeowner or tenant? ☐ Homeowner ☐ Tenant

Approximately how many inches of water were in your basement: _____ inches

Approximately how many inches of water were on your first floor: _____ inches

Is your basement used as a living area? ☐ Yes ☐ No

Do you have insurance to cover this loss? ☐ Yes ☐ No

Did structural damage occur to your home? ☐ Yes ☐ No

Name of person who completed this form: _____

Date: _____

Once completed, please return this form to:
Village of Willowbrook
7760 Quincy Street
Willowbrook, IL 60527
(630) 323-0787 fax or thalik@willowbrook.il.us