

**ESTIMATED DISASTER ECONOMIC INJURY WORKSHEET FOR BUSINESS**  
**(return by fax to: 206-205-4056, Attn: Timothy Doyle)**

Accurate responses to the questions below will assist in evaluating a request for a declaration of disaster.

1. Name of Business Owner: \_\_\_\_\_  
Name of Property Owner: \_\_\_\_\_  
Business/Property Address: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Telephone Numbers: Business: ( ) \_\_\_\_\_ Home: ( ) \_\_\_\_\_

2. **Estimated Adverse Economic Impact:**  
What period of time was your business affected by the disaster? \_\_\_\_\_ to \_\_\_\_\_  
MO/YR MO/YR

Estimate approximate dollar amount of gross sales/receipts for:

Disaster Period \$ \_\_\_\_\_

Corresponding Period Previous Year \$ \_\_\_\_\_

3. Business interruption insurance received or anticipated: \$ \_\_\_\_\_

4. Brief explanation of what adverse economic effects the disaster had on your business:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. How many persons did you employ **prior** to the disaster? \_\_\_\_\_

How many persons did you employ **after** the disaster? \_\_\_\_\_

**If your business also suffered a physical loss, answer te following questions:**

6. Estimated dollar loss to:  
Real Property (building), if owned: \$ \_\_\_\_\_  
Personal property (machinery and equipment,  
Furniture and fixtures, inventory, leasehold improvements, etc): \$ \_\_\_\_\_
7. Insurance recovery received or anticipated for **physical** damage: \$ \_\_\_\_\_

\_\_\_\_\_  
Signature of Business Owner/Representative

\_\_\_\_\_  
Date