

ESTIMATED DISASTER ECONOMIC INJURY WORKSHEET FOR BUSINESSES

Accurate responses to the questions below will assist Hyde County in negotiations with PCL Construction. Please return this form to the County of Hyde, PO Box 188, Swan Quarter, NC, 27885 Attention: Rosemary Johnson; via email at rjohnson@hydecountync.gov; or fax to 252.926.3701. All information will remain confidential between Hyde County, the individual reporting and PCL Outer Banks Claim Team.

1. Name of Property Owner: _____
Business/Property Address: _____
Mailing Address: _____
Telephone Numbers: Business: _____ Home: _____
Email Address: _____

Have you retained an attorney or joined any class action law suits in regard to this claim? Yes / No

2. Estimated Adverse Economic Impact

Did the disaster economically impact your business? If so, when did the impact start and end?

July 27, 2017 to Aug. 31, 2017
(month/year) (month/year)

What were your business' revenues during that period? \$ _____

What were your business' revenues during the same period of the prior year? \$ _____

3. Amount of business interruption insurance received or anticipated, if any: \$ _____

4. Provide a brief explanation of what adverse economic effects the disaster had on your business:

5. How many people did you employ **prior** to the disaster? _____

How many people did you employ **after** the disaster? _____

If your business also suffered property damage, answer the following questions:

6. Estimated dollar loss to:

Real property (building), if owned: \$ _____

Contents (machinery and equipment, furniture and fixtures,
inventory, leasehold improvements, etc): \$ _____

7. Insurance recovery received or anticipated for **property** damages: \$ _____

Signature of Business Owner/Representative

Date