



Data Collection Questionnaire
Village of Franklin Park
IEMA Incident #IL2010-0846, Severe Storm & Flood of July 23 & 24

Name: _____ Daytime Phone: _____

Address: _____ Evening Phone: _____

Length of Residence: _____ Email: _____

Did you have water in your house (Date):	Yes: _____	No: _____
If so, was it:		
Sewer backup from basement floor drain:	Yes: _____	No: _____
Ground water from sump pump pit:	Yes: _____	No: _____
If so: Did your sump pump fail	Yes: _____	No: _____
OR Was your sump pump able to keep up with the flow:	Yes: _____	No: _____

Did you get surface water from flooding in yard:	Yes: _____	No: _____
If yes, how did it get int the house:		
Window Well	_____	
Basement Door	_____	
1st Floor Door	_____	
Garage Door	_____	
Patio Door	_____	
Other (please specify): _____		

Was your yard flooded: North: South: East: West:

Was you street flooded:	Yes: _____	No: _____
If corner house, which street:	Front: _____	Side: _____
If so: Did your sump pump fail	Yes: _____	No: _____
OR Was your sump pump able to keep up with the flow:	Yes: _____	No: _____

Have you ever had floodwater in your home before: Yes: _____ No: _____

 If yes, date of occurrence: _____

Please explain:



What floor(s) were flooded:

Basement	_____	Depth of Water	_____
Garage	_____	Depth of Water	_____
First Floor	_____	Depth of Water	_____

Do you have (check all that apply):

Homeowners insurance	_____
Renters insurance	_____
Sewer backup insurance	_____
Sump pump insurance	_____
Flood insurance	_____

Do you have pictures of other documentation of the flooding:	Yes: _____	No: _____
If yes, may we contact you to get copies:	Yes: _____	No: _____

Residence Information: Own: _____ Rent: _____

Single Family _____ Multi Family _____ Apartment _____ Duplex _____ 2-Flat _____

Type of home:

Single story (no basement)	_____
Single story (with basement)	_____
Bi-level (no basement)	_____
Bi-level (with basement)	_____
Tri-level (no basement)	_____
Tri-level (with basement)	_____
Other, please describe:	_____

Did the residence sustain obvious/visible structural damage:	Yes: _____	No: _____
If yes, briefly describe the damage:	_____	
