



Ocean and Coastal
Resource Management

Initial Beachfront Damage Assessment Form – Property Owner

1362 McMillan Ave, Suite 400 Charleston, SC 29405

Date of Property Loss/Damage: _____ Date of Assessment: _____

Property Owner Name: _____

Property Address: _____

Property TMS #: _____

Type of Structure Assessed:

- Habitable Structure
- Erosion Control Device
- Pool

Initial Beachfront Damage Assessment:

- Needs Further Assessment
- Released for Construction Pending Written Authorization

Staff Assessment Performed By: _____

Comments: _____

DHEC Staff Contact: _____ Phone: (843) _____

DHEC 0996 (8/2011)

SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL



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