Please refer to the South Australian Government’s *Local Government Disaster Assistance Guidelines* when completing this form. The Guidelines are available on the Department of Treasury and Finance’s website.

Note more than one preliminary damages assessment can be submitted by a council if required. Each submitted form should be appropriately numbered.

**Section 1: Applicant Details**

1. **Council**

|  |
| --- |
|  |

1. **Address**

|  |
| --- |
|  |

1. **Primary Contact**

|  |  |
| --- | --- |
| Name of Officer  | XX |
| Position | XX |
| Phone |  |
| E-Mail |  |

1. **Chief Executive Sign-Off**

|  |
| --- |
| SignatureName Date |

**Section 2: Disaster Event Details**

1. **Disaster Name/Type of Event**

|  |
| --- |
| *Eg: Severe Storm, Sampson Flat Bushfire, River Murray Flood, Tidal Surge. For full list of eligible events refer to guidelines.* |

1. **Date(s) Event Occurred**

|  |
| --- |
|  |

1. **Description of impact resulting from the Disaster**

|  |
| --- |
| *Summarise the geographical scope of the disaster, extent of damage and the approximate number of residents impacted.*  |

**Section 3: Summary of Preliminary Damages Assessment**

1. **Preliminary Estimate of Expenditure required to undertake Eligible Measures**

|  |  |
| --- | --- |
| Eligible Measure | $ |
| *Reconstruction of Essential Public Asset ‑  Roads* |  |
| *Reconstruction of Essential Public Asset ‑ Other* |  |
| *Counter Disaster Operations* |  |
| *Community Recovery Fund Activities* |  |
| Total |  |

**Section 4: Details of Damage to Essential Public Assets**

Only complete if applicable.

1. **Name and qualifications of assessor**

|  |
| --- |
|  |

1. **Details of damaged assets**

|  |
| --- |
| *Attach details of each damaged asset including; asset value, location, function, description of damage, repair/reconstruction cost estimate, and information on the asset condition prior to the disaster event.**At a minimum complete the template provided on the DTF website to record the information and attach to this application. Photographic evidence to record the damage is preferred.*  |

1. **Disaster Mitigation Strategy Assessment**

|  |
| --- |
| *Detail any previous disaster events that damaged the same essential public asset or state that the asset has never been damaged by a natural disaster event.**Where the asset has previously been damaged, demonstrate the progress made in implementing disaster mitigation strategies to increase the resilience of the damaged asset.* |

1. **Insurance Coverage**

|  |
| --- |
| *State whether in part or whole the asset is covered by a pre‑existing insurance arrangement. If not, detail previous assessment of cost‑effectiveness and rationale applied for not insuring the damaged asset.* |

**Section 5: Preliminary Damages Assessment: Counter Disaster Operations**

Only complete if applicable.

1. **Identified Required Eligible Counter Disaster Operations**

|  |
| --- |
| *Describe operations to be undertaken. Describe how the operations were/are necessary to protect communities and ensure public health and safety in urban areas.*  |

1. **Estimated Expenditure Requirement**

|  |
| --- |
| *$XX. Attach detailed calculations.*  |

**Section 6: Preliminary Damages Assessment: Community Recovery Fund**

Only complete if applicable

1. **Assessment of the Severity of Community Impacts**

|  |
| --- |
| *Provide a description of the impact of the event on the community to substantiate the need for additional assistance for the community to promote recovery.* |

1. **Objectives of a Proposed Community Recovery Fund**

|  |
| --- |
| *Detail the activities that are proposed to be provided through the Fund and any specific outcomes it aims to achieve.* |

1. **Proposed Community Recovery Fund Governance Arrangements**

|  |
| --- |
| *Detail how the Fund will be administered, including governance arrangements, monitoring and reporting requirements and membership of any committee that has delegation regarding the distribution of grants (if applicable).* |

1. **Estimated Expenditure Requirement**

|  |
| --- |
| *$XX. Attach detailed calculations* |