



MISSISSIPPI HOME CORPORATION

Notice of Physical Damage

This form should be utilized to report to MHC physical damage sustained by the development at the time of occurrence.

Development Identification Number: MS- _____

Development Name: _____

Address: _____

 _____, Mississippi _____

1. Date physical damage occurred: _____
 2. Briefly describe the cause of damages: _____

 3. Please list the building identification number of building(s) affected and the unit number(s) affected: _____

 4. Please indicate the number of households displaced: _____
 5. Briefly describe the extent of the damages: _____

- Estimated cost of repairs*: _____
6. Estimated date of completion of repairs: _____

***Please submit a copy of the insurance estimates to the Mississippi Home Corporation, Compliance Division, P.O. Box 23369, Jackson, MS 39225-9953.**

(Signature)

(Date)

(Printed Name)

(Title)