

311/12

DAMAGE ASSESSMENT FORM:
EARTHEN HOUSING

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DAMAGE ASSESSMENT FORM:

EARTHEN HOUSING

A. Site (Brief General Description): _____

1. Urban _____ Rural _____

2. Type of soil(s) _____

3. Grade _____ %

4. Soil Structure: Hard Earth _____ Rock _____ Loose Earth _____
Compacted Soil _____ Fill _____ Sand _____

5. Other: _____

B. Soil Structure Interaction:

6. Cracks in soil around base of structure? Yes _____ No _____

7. Evidence in soil of rocking of building? Yes _____ No _____

8. Evidence of foundation slippage? Yes _____ No _____

C. Foundations:

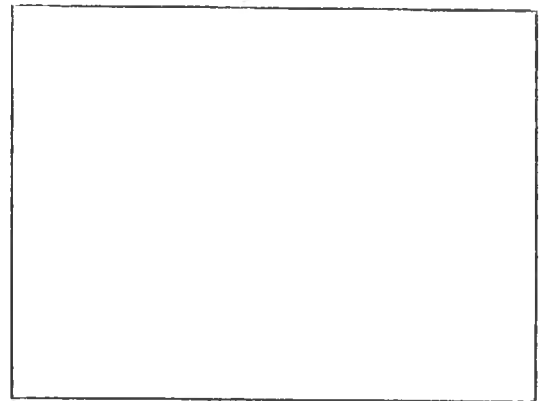
9. Type of foundation: None _____ 1-stage rock _____ 2-stage rock _____

10. Type of mortar: Mud _____ Lime/Mud _____ Cement _____ Other _____

11. Type of rocks: Rounded _____ Uncut edged _____ Cut _____

12. Design of foundation:

(Sketch cross-section; note dimensions)



13. Unusual factors: _____

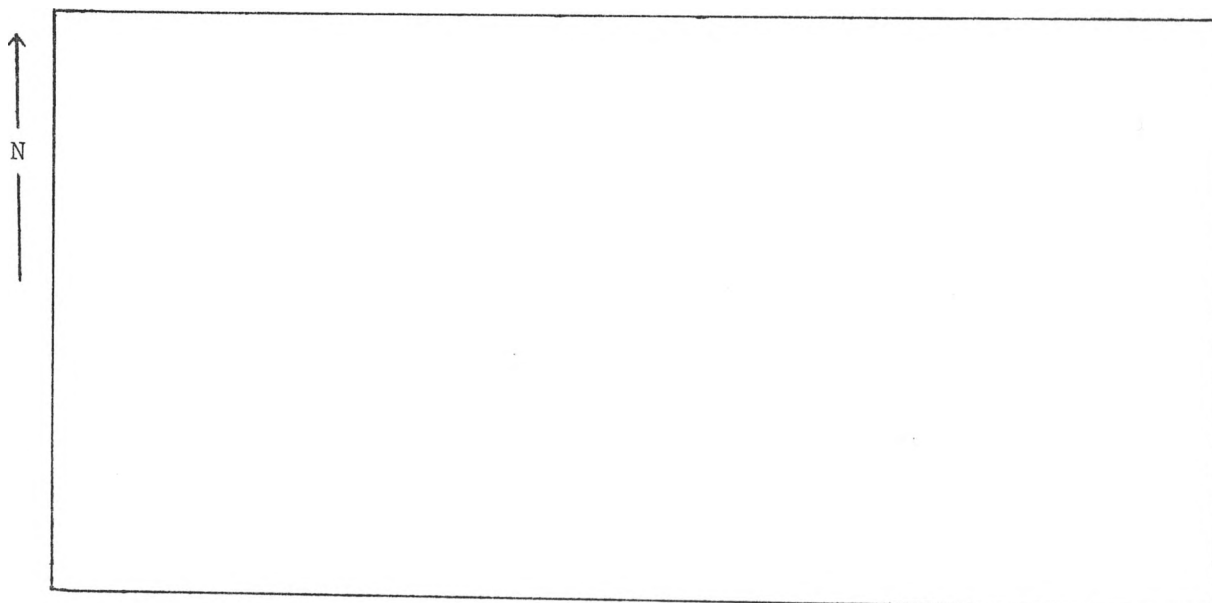
14. Foundation level? Yes _____ No _____

15. Evidence of damage in foundation? Yes _____ No _____

If yes, why and where? _____

D. Walls:

16. Materials used: Adobe _____ Brick _____ Block _____
Rammed Earth _____ Quincha _____ Bajareque _____
Stone _____ Other _____
17. Dimensions of basic building material: _____ cm. X _____ cm. X _____ cm.
18. Height of wall _____
19. Width of wall _____
20. Stories _____
21. If two or more stories, are upper walls built of same material as lower walls? Yes _____ No _____ Describe: _____
22. Reinforcement system (describe): _____
23. Type of mortar: Mud _____ Lime/Mud _____ Lime/Sand _____
Cement _____ Other (describe): _____
24. Thickness between blocks: Vertical _____ cm. Horizontal _____ cm.
% of width of block: _____ %
% of height of block: _____ %
25. Configuration: (Note dimensions; position of doors, windows, interior walls; relative position of other structures; exterior walls, etc. If possible, note location of bodies or of trapped survivors in the structure).



26. Type of damage to wall: Horizontal fracture _____
Vertical fracture _____ Shear _____
Echelon fracture _____ Collapse _____
27. Type of damage in corners: Fracture _____ Separation _____
Displacement _____ Collapse _____
28. Evidence of torque or racking? Yes _____ No _____
29. Describe sequence of failure, if possible: _____

30. Which portion of wall received greatest damage? Upper _____
Middle _____ Lower _____
31. Describe damage around doors, windows, lintels: _____

32. Did primary exit survive? Yes _____ No _____
33. Does door have lintel? Yes _____ No _____
34. Does door have wood frame? Yes _____ No _____
35. In a vertical distance of one meter, how many cm. out of plumb are
the walls? North Wall _____ cm. East Wall _____ cm. South Wall _____ cm.
West Wall _____ cm. Interior Wall _____ cm. Other _____ cm.
Other _____ cm.
36. Does the wall have a collar beam? Yes _____ No _____
37. If yes, what is collar beam made of? _____

E. Second Story

38. Of what material(s) is the floor made? _____
39. What type of beams are used to support the floor? _____

40. Are the beams embedded in the wall? Yes _____ No _____
If no, describe: _____
41. If beams are embedded in the wall, are they resting
On the adobes _____ On a piece of wood _____ Other _____
42. Describe damage to floor: _____

43. Describe damage to points where floor is attached to wall: _____

44. Other significant data about walls: _____

F. Roof and Roof Support

45. Roof configuration: Gable _____ Hip _____ Shed _____ Dome _____

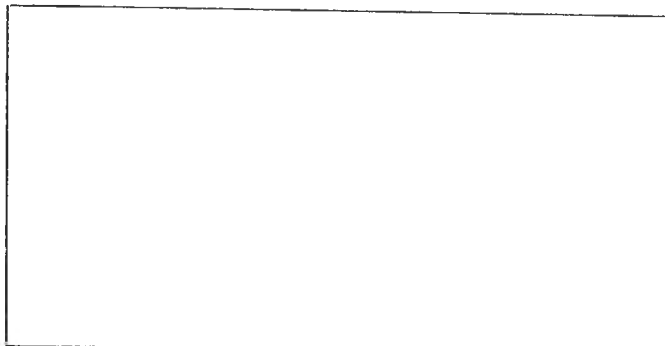
Other (describe): _____

46. Roof cover: Tile _____ Metal _____ Asbestos Cement _____

Wood _____ Other _____

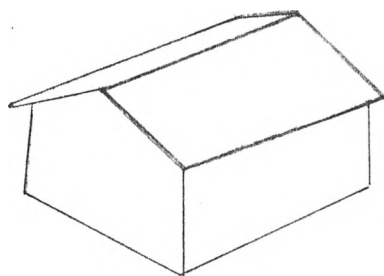
47. Roof support system:

(Draw roof support
system in cross-
section)



48. Estimated weight of roof: _____

49. If gable roof, show where damage occurred:



50. If trusses are used, describe any damage: _____

51. _____

Does any part of roof support rest on a collar beam? Yes _____ No _____

52. If any part of roof support is embedded in wall, describe damage to wall: _____

53. Describe any failures or damage to roof: _____

54. Does house have a ceiling? Yes _____ No _____ Describe any
relevant factors concerning ceiling: _____

G. Miscellaneous

55. Damage to utilities (describe): _____

56. Possibility of "transfer" damage from other structures?
Yes _____ No _____

GENERAL INFORMATION:

Community: _____

A. Address: _____

B. Name of Owner: _____

C. Name of Occupant: _____

D. Use of Building: Residence _____ Commercial _____
Residence & Commercial _____ Other _____

E. Estimated Total Loss: Less than 10% _____ 10-50% _____ Over 50% _____

F. Estimated Cost to Repair: _____

G. Building Safe for Occupancy? Yes _____ No _____ Partially _____

H. Technical Assistance Required? Yes _____ No _____

I. Recommended Action: Repair _____ Demolish _____ Vacate Only _____
Other _____

J. Owners/Occupants Plans: _____

K. Estimated Age of Building: _____

L. Earthquake Intensity: Richter _____ Modified Mercalli _____

M. Photo(s) Attached? Yes _____ No _____ Identifying Number(s) _____