

HISTORIC CHARLESTON FOUNDATION  
HURRICANE HUGO DAMAGE ASSESSMENT FORM

Date of Survey: 10/14/89

Survey Team: S.O.B. #2

Members:

Hudgins, March,  
Saylor, Reynolds

Video: Reel/Frame  
Camera:

Slides: [I. 24]  
B. & W.: [II 15, 16]

Name of Property: (if any)

Street Address: 16 Water

Tax Map Number: 459-13-1-27

Current Owner:

DESCRIPTION

Principal Building  Dependency [ ] Other [ ]

No. of Stories: Basement  1 [ ] 2  3 [ ] 4 [ ]

Attic or Half Story

Material:

Structure: Brick [ ] Wood Frame  Stone [ ] Metal [ ]  
Other [ ]:

Surface Covering: Stucco [ ] Wood Siding  Other [ ]:

Roof Covering: Slate  Metal [ ] Tile [ ] Asphalt [ ]  
Other [ ]:

Piazza: Foundation: Brick  Stone [ ] Wood [ ]  
Other [ ]:

Main Piazza: Brick [ ] Wood [ ] Other [ ]

Roof Covering (if different from main building):

Chimneys: Brick  Brick & Stucco [ ] Stone [ ] Other [ ]

Comments:

Address: 14 Water

Tax Map No.:

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## Damage Assessment

None

Minor

Major

%

## Exterior Features

Walls: Foundation/Basement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1st Floor	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2nd Floor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3rd Floor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4th Floor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attic	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Doors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Windows <i>(broken panes, not frames)</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> 2%
Shutters	<input checked="" type="checkbox"/>		
Piazza/Portico	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Downspouts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gutters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cornice	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parapet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Roof Covering	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> 5%
Dormers (Number: 0)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chimneys (Number: 1)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Other Visible Damage

Garden Walls/Fences	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gates	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walkways/Paving	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sidewalks	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trees	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mechanical	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

