PLEASE USE BLACK/BLUE BALLPOINT PEN – PRINT LEGIBLY SUPPORT DOCUMENTATION FOR BUSINESS INJURY OKLAHOMA DEPARTMENT OF EMERGENCY MANAGEMENT (800) 800-2481 Emergency Line - (405) 521-4053 Fax Line		
DISASTER OCCURRENCE DATE:	BUSINESS NAME:	BUSINESS ADDRESS:
	BUSINESS PHONE NUMBER:	
	TYPE OF BUSINESS:	COUNTY
HOW WAS THE BUSINESS IMPACTED?		
GROSS INCOME		
IMMEDIATE PAST TAX YEAR:		\$ A
DISASTER YEAR: ACTUAL GROSS INCOME TO DATE OF DISASTER		\$ B
DISASTER YEAR: PROJECTED INCOME LOSS AS A RESULT OF DISASTER		ER \$ C
PERCENTAGE OF LOSS = $\frac{C}{A}$		%

OEM Form DA 4