

# Map Your Neighborhood Emergency Preparedness Questionnaire

SAVE a stamp and complete this survey online: <https://www.surveymonkey.com/r/DCX9WC9>

1. PRINT Name: \_\_\_\_\_ 2. BEST phone # \_\_\_\_\_ Text? Yes/No
3. Physical Address: \_\_\_\_\_ 4. Email: \_\_\_\_\_
5. # of Household members: Adults \_\_\_\_\_ Children under 12 \_\_\_\_\_ Over 55 \_\_\_\_\_ (Special Needs \_\_\_\_\_)
6. Family has an emergency disaster kit? Yes/No If yes; for how many days? \_\_\_\_\_ A disaster plan? Yes/No
7. Will the family evacuate to an emergency HURRICANE evacuation shelter? Yes/No

Which emergency evacuation shelter? Aina Haina EI \_\_\_\_ Niu Valley Middle \_\_\_\_ Kalani HS \_\_\_\_

8. Do you have pets? Yes/No How many? \_\_\_\_\_ What kind? \_\_\_\_\_ Pet emergency kit? Yes/No
9. **Check all that apply** skills/services you could volunteer to our neighborhood in the event of an emergency:

<input type="checkbox"/> Medical - Doctor/Nurse	<input type="checkbox"/> Police/Auxiliary	<input type="checkbox"/> Pet enclosure and/or care for _____
<input type="checkbox"/> First aid or CPR trained	<input type="checkbox"/> Firefighter/EMT	<input type="checkbox"/> Crisis Counselor _____
<input type="checkbox"/> Search and Rescue	<input type="checkbox"/> HAM Radio Operator	<input type="checkbox"/> Construction/Electrician/Plumber/Carpenter
<input type="checkbox"/> Child care	<input type="checkbox"/> Leadership	<input type="checkbox"/> Language/Translator (describe in "Other")
<input type="checkbox"/> Logistics	<input type="checkbox"/> Cooking	<input type="checkbox"/> Forklift/CDL driver

Other (describe) \_\_\_\_\_

10. What equipment/supplies do you have that could be used in the event of an emergency? **Circle items**

<input type="checkbox"/> First aid and medical supplies, hand sanitizers	<input type="checkbox"/> Water filters, water containers, large pots
<input type="checkbox"/> Walkers, wheel chairs, crutches	<input type="checkbox"/> Cleaning supplies, mops, brooms
<input type="checkbox"/> Blankets, spare bedding, tarps, cots	<input type="checkbox"/> Crow bar, axe, chainsaw, rope
<input type="checkbox"/> Folding tables, folding chairs	<input type="checkbox"/> Long ladder, hand truck, wheelbarrow
<input type="checkbox"/> Portable lights, portable toilets	<input type="checkbox"/> Generator, walkie talkie
<input type="checkbox"/> Fire extinguisher, garden hose	<input type="checkbox"/> Solar powered equipment
<input type="checkbox"/> Propane tank, stove, lantern, cooking utensils	<input type="checkbox"/> RV, trailer, truck, van
<input type="checkbox"/> Tents – Size _____	<input type="checkbox"/> Extension cords, mini refrigerator

Other (describe) \_\_\_\_\_

11. Willing to be a block captain to educate and assist neighbors on your block? Yes/ No
12. Willing to serve on a neighborhood team (select any): Medical \_\_\_\_\_ Housing \_\_\_\_\_ Shelter Team \_\_\_\_\_  
 Planning \_\_\_\_\_ Resources \_\_\_\_\_ Training \_\_\_\_\_ Notification \_\_\_\_\_ Other \_\_\_\_\_
13. Are you interested in Community Emergency Response Training (CERT), which is a hands-on course on how to respond to emergencies. Yes/No If already CERT trained, what year took course? \_\_\_\_\_

*Privacy Notice: This information will be kept confidentially within the confines of our defined neighborhood. However, in the event of a local disaster, this information may be shared with the official Emergency Responders entrusted to provide us aid. Participation in this survey is optional, and completing this survey does not in any way guarantee or promise the safety or survival in any disaster.*

Mail survey to: **Aina Haina Prepared, PO Box 240762, Honolulu, HI 96824.** For questions, please send to: [ainahainaprepared@gmail.com](mailto:ainahainaprepared@gmail.com) or 808-620-5403. Please share this survey with your neighbors. Mahalo for your kokua!