

PARISH EMERGENCY PLANNING

Form to Aid Information Gathering within the Community

INTRODUCTION – PLEASE TAKE THE TIME TO READ

1. Nearly all emergencies affecting communities will be dealt with routinely by an integrated multi-agency response, however, a situation could occur (such as extensive flooding, storm damage, deep snow, power outage or major incident), which could delay the arrival of outside assistance due to services being overwhelmed, when our community will need to help itself.

2. An Emergency Management Team has been set up by the Parish to write a plan on behalf of the community. Emergency Planning is about ensuring that strategies are put in place to mitigate the effects of an incident. There is no way of knowing if, when, or under what circumstances we will need to have a community plan but we feel confident that you will be willing to assist us in identifying local skills and initiatives to assist in the development of a simple, self-help plan. Remember no matter how small you feel your personal assistance is it will be valued as part of the whole, and, don't forget, it may be you that needs help!

Parish: _____

Name: _____

Address: _____

Postcode: _____

Telephone: _____

Mobile: _____

Email: _____

Tick as many of the following as you are able to assist with:

WHAT TYPE OF PROPERTY DO YOU HAVE?					
House		Bungalow		Caravan	
Farm		Flat		Other	
HAVE YOU OR ANY OF YOUR HOUSEHOLD ANY OF THE FOLLOWING SKILLS (note if retired)?					
Doctor		Builder		Mechanic	
Pharmacist		Plumber		Corgi Gas Installer	
Nurse		Electrician		Fire Fighter	
First Aid		Engineer		Catering	
Administrative		HGV License		Rescue	
Amateur Radio		Plant Operator		Vet	
Other		Other		Other	
HAVE YOU OR ANY OF YOUR HOUSEHOLD ANY HOBBIES OR TALENTS THAT MIGHT BE OF USE IN AN EMERGENCY? IF SO PLEASE GIVE DETAILS:					
1.					
2.					
3.					
4.					
5.					
6.					
7.					

HAVE YOU ANY OF THE FOLLOWING AVAILABLE FOR EMERGENCY USE?					
Tractor		JCB		Radio transmitter	
Trailer		Lifting gear		Portable heater	
4x4 Vehicle		Heavy lifting gear		Gas cylinders	
Lorry		Portable pump		Mobile water tank	
Cycle		Motor cycle		Chain saw	
Blankets		Pillows		Transport	
Bus		Shoring		Camping Gas/ Equipment	<i>What?</i>
Sand bags		Megaphone		Other	
Other		Other		Other	
HAVE YOU ROOM TO ACCOMMODATE PEOPLE OR PETS?					
One		Two		More	
Dog		Cat		Other	
DO YOU HAVE AN ALTERNATIVE WATER SUPPLY ON YOUR PROPERTY?					
Well		Spring		Other	
DO YOU HAVE AN ALTERNATIVE FORM OF POWER/ HEATING/ LIGHTING?					
Generator		Fuel		Paraffin Heater	
Wood		Lantern		Other	
WHAT COOKING FACILITIES DO YOU HAVE?					
Electricity		Gas		Other	
HAVE YOU ANY OTHER RELEVANT INFORMATION?					
IF YOU ARE DISABLED OR ELDERLY AND WOULD YOU LIKE THE EMERGENCY MANAGEMENT TEAM TO HOLD YOUR PERSONAL DETAILS TO ENSURE THAT YOU ARE CONTACTED AND CARED FOR IN AN EMERGENCY? PLEASE CONTACT AND SOMEONE WILL VISIT TO DISCUSS/ TAKE DETAILS:					
Parish Representative's Name:			Telephone Number:		
WOULD YOU LIKE TO OFFER FUNDING TO ASSIST THE EMERGENCY MANAGEMENT TEAM WITH EQUIPMENT, PHOTOCOPYING, ETC? IF SO PLEASE CONTACT:					
Parish Representative's Name:			Telephone Number:		
DO YOU HAVE PARTICULAR SKILLS WHICH WOULD ASSIST THE EMERGENCY MANAGEMENT TEAM TO PLAN? IF SO PLEASE CONTACT:					
Parish Representative's Name:			Telephone Number:		
DO YOU NEED TO DISCUSS ANYTHING ELSE TO DO WITH INFORMATION GATHERING OR YOUR REQUIREMENTS IN AN EMERGENCY?					
Parish Representative's Name:			Telephone Number:		
<i>I agree to this information being used by the Community Emergency Management Team and have no objection to this being filed/ stored electronically if this is necessary.</i>				Signed:	

THANK YOU FOR YOUR ASSISTANCE

Please send the questionnaire back to The Ilfracombe Centre, 44 High St, Ilfracombe, EX34 8AL