



## Allegany County Hazard Mitigation Plan Community Survey

Allegany County is in the process of updating their Hazard Mitigation Plan (HMP). FEMA requires counties to update HMPs every five years for local jurisdictions to remain eligible to receive federal funding for hazard mitigation projects.

Past hazard events in Allegany County have underscored the need for communities to work together to reduce the impacts of future hazard events. To effectively plan strategies that limit the damage that future hazards may cause to your community, we need to hear from you.

Please complete paper survey **OR** complete survey online at

<https://www.surveymonkey.com/r/AlleganyHazardMitigationSurvey>

The following QR code will take you directly to the online survey.



1. Are you familiar with the current Allegany County Hazard Mitigation Plan?
  - Yes
  - No
  
2. How prepared do you feel **your community** is to withstand potential natural disaster events?
  - Not at all prepared
  - Somewhat prepared
  - Very prepared
  
3. In the past 10 years, which types of hazards have you experienced? Select all that apply.
 

<ul style="list-style-type: none"> <li><input type="checkbox"/> Drought</li> <li><input type="checkbox"/> Flood</li> <li><input type="checkbox"/> Erosion to roads</li> <li><input type="checkbox"/> Earthquake</li> <li><input type="checkbox"/> Extreme heat</li> <li><input type="checkbox"/> Extreme cold</li> <li><input type="checkbox"/> Hail</li> <li><input type="checkbox"/> Landslide</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Lightning</li> <li><input type="checkbox"/> Snowstorm</li> <li><input type="checkbox"/> Tornado</li> <li><input type="checkbox"/> Wind</li> <li><input type="checkbox"/> Forest fire</li> <li><input type="checkbox"/> None of the above</li> <li><input type="checkbox"/> Other: -----</li> </ul>
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4. Which of these are you concerned could **impact Allegany County**? Select all that apply.

- |   |  |
|---|--|
| <input type="checkbox"/> Drought          | <input type="checkbox"/> Lightning         |
| <input type="checkbox"/> Flood            | <input type="checkbox"/> Snowstorm         |
| <input type="checkbox"/> Erosion to roads | <input type="checkbox"/> Tornado           |
| <input type="checkbox"/> Earthquake       | <input type="checkbox"/> Wind              |
| <input type="checkbox"/> Extreme heat     | <input type="checkbox"/> Forest fire       |
| <input type="checkbox"/> Extreme cold     | <input type="checkbox"/> None of the above |
| <input type="checkbox"/> Hail             | <input type="checkbox"/> Other:            |
| <input type="checkbox"/> Landslide        | -----                                      |

5. How prepared do you feel **you** are for natural disaster events likely to occur in Allegany County?

- Not at all prepared       Somewhat prepared       Very prepared

6. If a severe hazard happened today causing loss of services to your home, and you were unable to leave or access a store for 72 hours, which of these do you have readily available? Select all that apply.

- |  |  |
|--|--|
| <input type="checkbox"/> Back-up Power | <input type="checkbox"/> Containers of Water |
| <input type="checkbox"/> Portable Gas  | <input type="checkbox"/> None of the Above   |

7. In the event your home becomes uninhabitable, do you have a place to stay that offers the services listed in the question above?

- Yes       No       I'm not sure

8. Has a hazard event resulted in the loss of access to clean drinking water, whether it be municipal supply or private well? (For example: water main break or contaminated water supply, etc.)

- Yes       No       I'm not sure

If "Yes" above, please describe how long you were without access to clean water and how you obtained clean water:

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9. Which of the following steps has your household taken to prepare for a local hazard event? Select all that apply.

- Completed first aid/CPR training
- Made an emergency plan
- Identified utility shutoffs
- Prepared a disaster supply kit
- Installed smoke detectors on each level of home
- Stored food and water
- Stored flashlights and batteries
- Other: \_\_\_\_\_
- Stored a battery-operated radio
- Stored a fire extinguisher
- Stored medical supplies (e.g., first aid kit, medications)
- Registered to receive emergency alerts
- Purchased additional insurance to cover losses (i.e., flood insurance)
- Identified the location of the nearest emergency shelter
- Received emergency preparedness information from a government source

10. If a hazard event has caused significant damages to your home in the past, please explain the damage sustained and when it occurred.

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11. If in the past 10 years, have you been forced to evacuate your home due to a hazard event, please state where you went and how long you were displaced.

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12. To the best of your knowledge, is your home located in a flood zone?

- Yes                       No                       I'm not sure

13. If your home is located in a flood zone, do you carry flood insurance?

- Yes                       No                       I'm not sure                       My home is not in a flood zone.

14. If your property were located in a designated high-hazard area (for example, a flood zone) or repeatedly damaged from a natural disaster, would you consider any of the following options? Select all that apply.

- Selling your property
- Elevating your structure
- Moving your structure to another property or a less risky part of your property
- I'm not sure
- None of the above
- Flood proof your structure
- Look into other ways to reduce risk

15. What factor(s) would influence your decision on mitigation actions to limit future damages to your property? Please select all that apply.

- Cost
- Ability to move/relocate
- Other: \_\_\_\_\_
- Awareness of available programs
- Length of process

16. Have you taken any mitigation measures to protect your property from potential hazards? For instance, making structural upgrades, or purchasing insurance. If so, please briefly describe.

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17. Please list any locations or assets within your community that are exposed to hazard risks that may be in need of hazard mitigation (For example: schools, hospitals, emergency services, municipal, etc.).

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18. Does your household include any of the following that may be more vulnerable or at risk before, during, or after a hazard event? Select all that apply.

- Low-income individuals and families
- Households with no vehicle
- Households with no Internet access
- None of the above
- Seniors/65 and older
- Children under the age of 18
- People with disabilities
- Other: \_\_\_\_\_

19. What resources or services do you feel your household would benefit from to better prepare for, cope with, and recover from the impacts of hazard events?

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20. What factor(s) would influence your decision on mitigation actions to limit future damages to your property? Please select all that apply.

- Provide effective emergency notifications and communication
- Provide outreach regarding emergency preparedness
- Provide training and education on how to reduce future damage
- Create awareness on special needs and vulnerable populations
- Other: -----

21. How likely are you to receive notifications from the following systems regarding hazards or a disaster?

	Very Unlikely	Somewhat Unlikely	Neither likely nor unlikely	Somewhat Likely	Very Likely
Local Newspaper	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Police, Fire, EMS, 9-1-1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TV News	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Radio News	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
County Website	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public Library	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Media (e.g., Facebook, Instagram, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CODE RED	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify): -----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

22. Which local newspapers, public libraries, local radio stations, and TV stations does your household most utilize? Which of these would you most likely check for hazard notifications?

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23. Do you have access to internet service from your residence?

- Yes                       Yes, but service is not always reliable                       No

24. Do you have access to internet service from your residence?

- Yes                       Yes, but service is not always reliable                       No

25. Which town or village do you live?

- |   |   |
|---|---|
| <input type="checkbox"/> Alfred (Town)        | <input type="checkbox"/> Cuba (Town)                    |
| <input type="checkbox"/> Alfred (Village)     | <input type="checkbox"/> Cuba (Village)                 |
| <input type="checkbox"/> Allen (Town)         | <input type="checkbox"/> Friendship (Town)              |
| <input type="checkbox"/> Alma (Town)          | <input type="checkbox"/> Genesee (Town)                 |
| <input type="checkbox"/> Almond (Town)        | <input type="checkbox"/> Granger (Town)                 |
| <input type="checkbox"/> Almond (Village)     | <input type="checkbox"/> Grove (Town)                   |
| <input type="checkbox"/> Amity (Town)         | <input type="checkbox"/> Hume (Town)                    |
| <input type="checkbox"/> Andover (Town)       | <input type="checkbox"/> Independence (Town)            |
| <input type="checkbox"/> Andover (Village)    | <input type="checkbox"/> New Hudson (Town)              |
| <input type="checkbox"/> Angelica (Town)      | <input type="checkbox"/> Oil Springs Reservation (Town) |
| <input type="checkbox"/> Angelica (Village)   | <input type="checkbox"/> Richburg (Village)             |
| <input type="checkbox"/> Belfast (Town)       | <input type="checkbox"/> Rushford (Town)                |
| <input type="checkbox"/> Belmont (Village)    | <input type="checkbox"/> Scio (Town)                    |
| <input type="checkbox"/> Birdsall (Town)      | <input type="checkbox"/> Ward (Town)                    |
| <input type="checkbox"/> Bolivar (Town)       | <input type="checkbox"/> Wellsville (Town)              |
| <input type="checkbox"/> Bolivar (Village)    | <input type="checkbox"/> Wellsville (Village)           |
| <input type="checkbox"/> Burns (Town)         | <input type="checkbox"/> West Almond (Town)             |
| <input type="checkbox"/> Canaseraga (Village) | <input type="checkbox"/> Willing (Town)                 |
| <input type="checkbox"/> Caneadea (Town)      | <input type="checkbox"/> Wirt (Town)                    |
| <input type="checkbox"/> Centerville (Town)   | <input type="checkbox"/> Would rather not say           |
| <input type="checkbox"/> Clarksville (Town)   | <input type="checkbox"/> Other (please specify):        |

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26. Which age range are you in?

- Under 18
- 18 – 24 years old
- 25 – 34 years old
- 35 – 44 years old
- 45 – 54 years old
- 55 – 64 years old
- 65 years and over

27. Do you own or rent your home?

- Own
- Rent
- Other (please specify): \_\_\_\_\_

28. What type of home do you live in?

- Single-family detached
- Multi-family detached
- Town Home
- Mobile home/manufactured home
- Apartment Complex/Condominium
- Commercial
- Other (please specify): \_\_\_\_\_

29. Do you work in Allegany County?

- Yes
- No

30. Please feel free to leave any additional comments below.

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**Return completed survey to:**

Jared Pristach at [JPristach@LaBellaPC.com](mailto:JPristach@LaBellaPC.com)

**or by mail**

LaBella Associates, 300 State Street, Suite 201, Rochester, NY 14614

**Survey deadline:**

**TBD**

**Questions?** Call Jared Pristach at 585-454-6110