Disaster Preparedness Survey

The WPU-SBDC is conducting this survey to collect information on the impact of disasters on local businesses. This information will be used to increase the effectiveness of the SBDC’s assistance in preparing a comprehensive disaster preparedness plan, and aid in the recovery and growth of businesses after an event.

Date: ______________________  Phone: ______________ Fax: __________________

Contact name: ___________________________  Phone: ___________________ Fax: _______________

Name of Business: ___________________________  Email: ______________________

Type of Business: ___________________________

Street Address: ___________________________ City: __________ State: _______ ZIP: ________

1. Time in Business: Years______ Months ______

2. Total Number of employees (Full & PT): ______

3. Do you have a written disaster recovery Plan (Y/N/Not sure)? ___________________________

4. Do you need assistance in preparing a recovery plan (Y/N/ Not sure)? __________________________

5. Is your business located in a flood Zone or flood prone area (Y/N/Not sure)? __________________________

6. Please list any recent disaster that affected your business (Flood, Fire etc.) ___________________________

7. Time impacted by event: Months ______ Weeks ______ Days ______

8. Estimate of your Financial Loss: $________________________

9. Describe any Physical Damage (Property damage etc.): __________________________

10. Describe any specific challenge you encountered during your recovery: __________________________

11. Disaster assistance received (Insurance, FEMA, Red Cross, SBA etc.): __________________________

12. Note any challenges that you continue to experience due to the disaster: __________________________

SBDC client # _____-_______  Phone: 973-754-8695  Fax: 973-754-9153