

Appendix *D*

Appendix D

SURVEY NUMBER: _____ [Interviewer: Leave survey number blank!]

DATE: _____

FEMA DR 1293

SURVEY QUESTIONS FOR DISASTER-IMPACTED BUSINESSES (DR-1293)

Interviewer please complete for yourself:

Interviewer Name: _____

Phone/Fax/e-mail: _____

Introduce yourself and provide the following information to the interviewee:

This information is being collected to identify economic needs and available resources of disaster-impacted communities in Virginia. Questions within this survey may duplicate some of the questions that will be asked in other interviews. The answers to these questions will not be used to determine individual funding needs or to complete specific damage surveys.

Be prepared to help the interviewee clarify needs and wants. For example, if the answer is “money,” ask what specifically the money is for.

PLEASE COMPLETE THE FOLLOWING IN AS MUCH DETAIL AND AS LEGIBLY AS POSSIBLE:

General Business Information

1. Name of Business: _____
2. Economic Sector (check one): _____
 Construction Manufacturing Transportation/Public Utilities
 Trade (Retail) Trade (Wholesale) Finance, Insurance, and Real Estate
 Services Tourism/Hospitality Agricultural Services Other
3. Primary Line of Business: _____
4. Street Address: _____
5. City/State/Zip code: _____
6. Community/County (check one):
 City of Franklin Southampton County Isle of Wight County
7. Interviewee's Name: _____
8. Interviewee's Position (i.e.: owner, president, property manager, etc.) _____
9. How long has this business been in operation (years)? _____
10. How long has this business been at this location (years)? _____

Business Operations Information

11. Is the building owned by your business or rented (check one): Owned Rented
If owned: 12. Square footage of building area occupied by your business: _____
13. Percentage of the building's square footage occupied by your business: _____ %
14. Has your building been condemned (check one): Yes No
If rented: 15. Square footage of building area occupied by your business: _____
16. Rental cost: _____ \$/mo., qtr., year (circle one)

Survey Questions for Disaster-Impacted Businesses

17. What is your business's annual gross revenue (\$/yr.): _____

18. What percentage of your gross revenue is made during the following time periods: _____

___% January-March ___% April-June ___% July-September ___% October-December

19. Is your business currently operating: Yes No

If YES, go to Question 26

If NO, proceed with Question 20.

20. Will you resume business operations: Yes No

If YES, go to Question 26

If NO, proceed with Questions 21 through 25.

21. Please describe the reasons for not reopening: _____

22. Annual business payroll (\$/year) (owner and employees): _____

23. Number of employees working at the business location before the flood (including owner): _____

24. Number of employees injured (either on-site or off-site) by the flood and aftermath: _____

25. Number of employees displaced from their homes by the flood: _____

For businesses not resuming operations, go to Question 63

26. Was there or will there be any loss in revenue due to the disruption of the business: Yes No

If NO, go to question 30.

If YES, proceed with question 27.

27. What is the estimated dollar value (\$) of lost revenue: _____

28. What percentage (%) of your business disruption losses will be made-up (recovered) over the next six months (i.e. extra production shifts, working weekends, post-disaster consumer demand): _____ %

29. Does your business anticipate any change in its market share due to the disaster: Yes No

30. Is your business currently operating in its original location: Yes No

If NO, go to Question 35.

If YES, proceed with Question 31.

31. Was the business shut down for any time after the disaster: Yes No

If NO, go to Question 35

If YES, proceed with question 32.

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32. If the business was shut down, for how long (in days): _____
33. Were there any infrastructure issues that prevented your business from operating at the pre-disaster capacity? If yes, indicate the time (in days) each issue impacted the operation of your business: _____
- water _____ sewer system _____ phone _____ electric power _____
- road closure _____ parking _____ trash removal _____
- employees _____ other. Please explain _____
34. Were any environmental problems encountered that prevented or delayed the reopening of your business: _____
- Yes No
- If yes, describe the environmental problems that have been encountered (hazardous materials, floodplain determination): _____
35. At what percent of pre-disaster capacity (or production levels) is the company functioning: _____ %
36. If the previous answer is less than 100%, based upon your location and surrounding damage, how long do you anticipate before returning to pre-disaster sales and/or production levels (from September 16th): _____
37. Is **your business planning to** move from its flooded location to some other location?
- Yes; within the community Yes; within the state
- Yes; in another state No; will reopen on the same site
38. If **your business is moving**, what is your estimate of the cost (\$) of the move (also include costs of business disruption and temporary rental space): _____
39. What type of resources would you need to reopen/rebuild (computer system, construction materials, inventory): _____
40. Prior to the flood, what was the **total (replacement) value (\$)** of your business contents (i.e., furniture, equipment, computers, etc. - items not related to building structure): _____
41. As a result of the flood, what is the **estimated cost (\$)** to repair and/or replace your damaged business contents: _____
42. Prior to the flood, what was your annual business payroll (\$/year) (owner and employees): _____
43. Number of employees working at the business location before the flood (including owner): _____
44. Number of employees working at the business location currently (other than clean up): _____
45. Total number of employees who will eventually return to work for the business: _____
46. Number of employees injured (either on-site or off-site) by the flood and aftermath: _____
47. Number of employees displaced from their homes by the flood: _____
48. Do you own the building where your business operates: Yes No

If NO, go to Question 52.

If YES, proceed with Question 49.

Survey Questions for Disaster-Impacted Businesses

49. Prior to the flood, what was the value of the building and related improvements: _____

50. What is the estimated cost (\$) to repair the building damage to the business: _____

51. What is the estimated cost (\$) to repair/replace other site improvements owned by the business (i.e. fences, signs, storage sheds, landscaping): _____

52. Does your business depend upon maintaining an inventory of raw materials, manufactured items, and purchased merchandise for sale:

Yes No

If NO, go to Question 58.

If YES, proceed with Question 53.

53. What percentage of your revenue is derived from sale of **manufactured products**: _____ %

54. What percentage of your revenue is derived from sale of **purchased merchandise**: _____ %

55. Prior to the flood, what was the **total (replacement) value (\$)** of your business inventory (spare parts, raw materials, finished product, merchandise, etc.): _____

56. As a result of the flood, what is the **estimated cost (\$)** to replace and/or repair your damaged business inventory: _____

57. How long does it take inventory to reach you once it has been order: _____

58. Does your business depend upon “rolling stock” (delivery trucks, company cars, mobile construction equipment):

Yes No

If NO, go to Question 61.

If YES, proceed with Question 59.

59. Prior to the flood, what was the **total (replacement) value of all rolling stock owned by your company**:

60. As a result of the flood, what is the **estimated cost (\$)** to repair and/or replace your damaged rolling stock:

61. Were there plans to expand your business prior to the disaster: Yes No

62. Are you now considering expansion of the business: Yes No

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Insurance Information

63. Does your business have insurance of any kind: Yes No

If NO, go to Question 67.

If YES, proceed with Question 64.

64. What type of insurance policies did your firm have (check all that apply):

- liability property and casualty (P&C)
 commercial fire loss of revenue (business interruption) flood

65. If your business has property and casualty, flood, or fire insurance, is it fair market value or replacement cost insurance? fair market value replacement cost

66. What percentage of your business loss was covered by insurance: _____

67. What is your dollar estimate (\$) of your business's uninsured losses: _____

68. How is your business planning to pay for any uninsured losses (i.e., loans, savings, increased production, etc.):

69. Based upon the damage and loss sustained by your business, are there any plans to utilize any Small Business Administration (SBA) programs: Yes No

If yes, briefly explain: _____

70. Has your business participated in mitigation projects based on a disaster experience: Yes No

(Mitigation may be a project that is intended to lessen the impact of a future disaster. For example, a structure may be raised above the 100-year flood elevation.)

If yes, briefly explain the project: _____

71. **If your business is not operating at this time**, what is your estimate of the minimum amount of money needed to open your business? _____