

Do you have special needs that would require help in an emergency or evacuation? If "yes", please fill out the survey below.

Please complete and return yearly or if your situation changes. Check the New Survey box below if this is the first time you are completing this survey or haven't done so in years. When special assistance is no longer needed, please email wem@waterfordct.org.

When completed you can either: email it to wem@waterfordct.org; mail to 204 Boston Post Road, Waterford, CT 06385, or drop off at the Waterford Senior Center.

▼ THIS INFORMATION WILL BE KEPT CONFIDENTIAL ▼

I / this person will need assistance in the event of an emergency or evacuation: PLEASE PRINT

name	date	
street address		
city	state	zip code
phone number home ()	cell () work ()	*TDD/TTY ()
If you are a part-time resident (i.e., summer only), please list the months you are living at this address: From: _____ To: _____		

* Telecommunication Device for the Deaf/Text Telephone

Please mark an "X" in each box that applies.

This is a new survey, or one that hasn't been updated in years.

Need assistance for evacuation for the following reasons:

<input type="checkbox"/> Hearing impaired and need assistance for evacuation.	<input type="checkbox"/> I use a wheelchair and need an accessible ride.	<input type="checkbox"/> Life Support Device and need special assistance. (Explain) _____
<input type="checkbox"/> Sight impaired and need assistance for evacuation	<input type="checkbox"/> Use *TDD/TTY	<input type="checkbox"/> Other needs that will prevent prompt evacuation. (Explain) _____
<input type="checkbox"/> Confined to bed.	<input type="checkbox"/> Need a ride for evacuation.	

Name of person completing this survey _____ Phone: () _____

Relative or other person we can notify to help you in the event of an emergency or evacuation:

NAME		
STREET ADDRESS		
CITY	STATE	ZIP CODE
PHONE NUMBER HOME ()	CELL () WORK ()	*TDD/TTY ()



Waterford Emergency Management

204 Boston Post Road
Waterford, CT 06385
860-442-9585



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