Chenango Bridge Fire. Co. Inc.

Pre-Incident Planning Survey

| Address: Name of key holder (neighbor, friend): | | Home Phone #: Cell Phone #: Phone #: | | |
|---|------|--|----|--|
| | | | | |
| # of Occupants: | .0 | SIDE C (BACK) | | |
| Number of floors (not inc. basement): | | | 7 | |
| Basement present? Yes No | | | | |
| · | В | HOUSE | D | |
| Location of: | | | | |
| -Gas shut-off: Side: | | | | |
| -Circuit Panel: Floor Side: | | SIDE A (FRONT) | | |
| - Children's Room windows: Floor: Side: | | | | |
| - Electric meter location: Side: | | | | |
| - Do you currently have working smoke/heat detectors in your ho | ous | se?Yes | No | |
| - Do you currently have working Carbon Monoxide detectors in your house?Yes | | | No | |
| - Is there a fire hydrant within 1000 ft of your house? | | Yes | No | |
| If YES, in front of what address: | | | | |
| -Type of roof covering (check one)Asphalt shingle | | Metal Other | | |
| -Home size: Length:ft. Width:ft. Overal | ll s | sq. ft: sq. ft. | | |
| - Would anyone in your residence have difficulties exiting in case | of | an emergency?Yes | No | |
| *If yes, please explain below. | | | | |
| Do you have any other useful information? I.e. fuel oil tanks, prop | oai | ne storage, pets. | | |
| | | | | |
| | | | | |
| | | | | |

Please kindly return this survey along with any other useful forms such as a copy of your floor plan to the address below. Thank you for your time and consideration in providing this useful information.

Pre-incident Planning Committee Chenango Bridge Fire Co. Inc. P.O. Box 12 Chenango Bridge, NY 13745

Please complete your survey and return it to usby email at PrePlan@ChenangoBridgeFire.com, using the address to the left, or dropping it by the station Monday Evenings 7pm-9pm.