

Stewartstown Emergency Management—Information Sheet

Do you or anyone living in your household have any disabilities? Yes: _____ No: _____

Physically Disabled: _____ Developmentally Disabled: _____ Dialysis Treatments: _____

Visually Impaired: _____ Legally Blind: _____ Hard of Hearing: _____

Bed Ridden: _____ Asthma or Allergies requiring medicine on a daily or regular basis: _____

Do you or anyone living in your household require any special equipment? Yes: _____ No: _____

Lift Van: _____ Wheel Chair: _____ Oxygen Tanks: _____ Dialysis Machine: _____

Walker or Cane: _____ Guide Dog: _____ Respirator: _____

Medicines or Inhalers: _____ TTY or Teletype: _____ Oxygen Concentrator: _____

Ambulance: (Individuals cannot ride in bus/car or van): _____

Municipal Transportation (private car not available or not able to share a ride): _____

Other: _____

If Yes, please list their names and age?

Name: _____ Age: _____ Requirements: _____

Name: _____ Age: _____ Requirements: _____

Name: _____ Age: _____ Requirements: _____

Name: _____ Age: _____ Requirements: _____

Can everyone (Adults) in your house understand English?

Yes: _____ No: _____ Which Language do you understand? _____

IF YOU ANSWERED ANY OF THE QUESTIONS ABOVE PLEASE COMPLETE THE FOLLOWING AND RETURN TO THE STEWARTSTOWN BOROUGH OFFICE

**C/O EMERGENCY MANAGEMENT TEAM
6 N. Main Street / Suite A, Stewartstown, PA 17363**

(PLEASE PRINT)

Name: _____

Address: _____

Apartment or Unit #: _____

Telephone Number: _____ Is it Unlisted: _____

How many individuals live in your household (include all adults & children): _____

Name of Person completing this form: _____

Relationship / Position: _____ Date Completed: _____

Note: This information is considered *confidential* and will only be used for emergency purposes.

Stewartstown Borough/EMA Office
6 N. Main St. / Suite A
Stewartstown, PA 17363
(717) 993-2963
Internet: www.stewartstown.org

BULK RATE
U.S. POSTAGE PAID
Stewartstown, PA 17363
Permit No. 26

Office Hours:

Monday-Friday
9:00 AM – 3:00 PM



Stewartstown Borough Emergency Management Resident Information

The Emergency Management Office of Stewartstown Borough is asking that all residents take a few minutes to complete the EMA survey, and if applicable, complete the form and mail it back to the EMA Office for Stewartstown Borough. Completed surveys can also be dropped off in the "Overnight Drop Box" located on the side entrance of the borough office (next to M&T Bank).

All residents with special needs, as well as day care centers, nursery centers and adult/senior centers should complete this form. If you know of someone that this survey would apply to, please make sure that they complete this form or provide them with some assistance to complete it for them.

Note: All information will be used for "Emergency" purposes only and is considered "**confidential**". The State of Pennsylvania and York County require that our Emergency plans include procedures for the evacuation of residents with special needs or require assistance in the event of an evacuation.