



CLATSOP COUNTY MULTI-JURISDICTIONAL NATURAL HAZARDS MITIGATION PLAN 2020

A Whole Community Approach to Reducing Disaster Risk & Vulnerability

Clatsop Community Survey: 2021-26 Natural Hazards Mitigation Plan

The *Natural Hazards Mitigation Plan (NHMP)* identifies hazards that threaten our communities, evaluates our vulnerability to those threats, and outlines strategies to reduce or eliminate the risk posed by those threats. The Clatsop County Emergency Management Division and the NHMP Steering Committee update the Plan every five years. For the 2021-2026 plan, Clatsop County has come together with five jurisdictions and ten special districts and is working to build consensus about the priorities for the next five years.

1. Where do you live in Clatsop County? In this context, 'live' means over 50% of the year.

- | | |
|--|---|
| <input type="checkbox"/> Astoria | <input type="checkbox"/> Lewis & Clark |
| <input type="checkbox"/> Arch Cape | <input type="checkbox"/> Mist-Birkenfeld |
| <input type="checkbox"/> Cannon Beach | <input type="checkbox"/> Olney-Walluski |
| <input type="checkbox"/> Cullaby Lake | <input type="checkbox"/> Seaside |
| <input type="checkbox"/> Elsie-Vinemaple/Jewell | <input type="checkbox"/> Surf Pines |
| <input type="checkbox"/> Gearhart | <input type="checkbox"/> Sunset Beach |
| <input type="checkbox"/> Hamlet | <input type="checkbox"/> Warrenton-Hammond |
| <input type="checkbox"/> Jeffers Garden/Miles Crossing | <input type="checkbox"/> Westport |
| <input type="checkbox"/> Knappa/Svensen | <input type="checkbox"/> I live outside of Clatsop County |

2. How concerned are you about the following natural hazards where you live?

Please mark an X for your level of concern for each hazard.

	Very Concerned	Somewhat Concerned	Neutral	Not Very Concerned	Not Concerned
COASTAL EROSION					
DROUGHT					
EARTHQUAKE					
FLOOD					
LANDSLIDE					
TSUNAMI					
VOLCANIC ERUPTION					
WILDFIRE					
WIND/ WINTER STORM					

3. Where do you work in Clatsop County? *Select all that apply.*

- | | |
|---|---|
| <input type="checkbox"/> Astoria | <input type="checkbox"/> Lewis & Clark |
| <input type="checkbox"/> Arch Cape | <input type="checkbox"/> Mist-Birkenfeld |
| <input type="checkbox"/> Cannon Beach | <input type="checkbox"/> Olney-Walluski |
| <input type="checkbox"/> Cullaby Lake | <input type="checkbox"/> Seaside |
| <input type="checkbox"/> Elsie-Vinemapple/Jewell | <input type="checkbox"/> Surf Pines |
| <input type="checkbox"/> Gearhart | <input type="checkbox"/> Sunset Beach |
| <input type="checkbox"/> Hamlet | <input type="checkbox"/> Warrenton-Hammond |
| <input type="checkbox"/> Jeffers Garden/ Miles Crossing | <input type="checkbox"/> Westport |
| <input type="checkbox"/> Knappa/Svensen | <input type="checkbox"/> I work outside of Clatsop County |

4. How concerned are you about the following natural hazards where you work?

Please mark an X for your level of concern for each hazard listed.

	Very Concerned	Somewhat Concerned	Neutral	Not Very Concerned	Not Concerned
COASTAL EROSION					
DROUGHT					
EARTHQUAKE					
FLOOD					
LANDSLIDE					
TSUNAMI					
VOLCANIC ERUPTION					
WILDFIRE					
WIND/ WINTER STORM					

5. Select any locations where you own residential rental or commercial property?

- | | |
|---|--|
| <input type="checkbox"/> I don't own other property | <input type="checkbox"/> Knappa / Svensen |
| <input type="checkbox"/> Astoria | <input type="checkbox"/> Lewis & Clark |
| <input type="checkbox"/> Arch Cape | <input type="checkbox"/> Mist-Birkenfeld |
| <input type="checkbox"/> Cannon Beach | <input type="checkbox"/> Olney-Walluski |
| <input type="checkbox"/> Cullaby Lake | <input type="checkbox"/> Seaside |
| <input type="checkbox"/> Elsie-Vinemapple/Jewell | <input type="checkbox"/> Surf Pines |
| <input type="checkbox"/> Gearhart | <input type="checkbox"/> Sunset Beach |
| <input type="checkbox"/> Hamlet | <input type="checkbox"/> Warrenton-Hammond |
| <input type="checkbox"/> Jeffers Garden/ Miles Crossing | <input type="checkbox"/> Westport |

6. How concerned are you about the following natural hazards impacting your rental or commercial property? *Mark "X" to indicate level of concern for each hazard.*

	Very Concerned	Somewhat Concerned	Neutral	Not Very Concerned	Not Concerned
COASTAL EROSION					
DROUGHT					
EARTHQUAKE					
FLOOD					
LANDSLIDE					
TSUNAMI					
VOLCANIC ERUPTION					

WILDFIRE
WIND/ WINTER STORM

7. Household Preparedness Please check the box that is most accurate to indicate the activities that you or someone in your household has completed.

	Done	Plan to Do	Unable to Do	Need Help	Not Done
Attended meetings or received written information on natural disasters or emergency preparedness?					
Talked with household members about what to do in case of a natural disaster or emergency?					
Developed a "Household Emergency Plan" that identifies what everyone does in a disaster?					
Prepared a disaster "go" kit—one that you can take with you in case of evacuation?					
Prepared a 3-day supply of water, food, medicine, and other basic essentials for your family/household?					
Prepared a 14-day (or more) supply for a major disaster?					
Been trained in First Aid or Cardio-Pulmonary Resuscitation (CPR) in the last year?					
Prepared your home by having smoke and carbon monoxide detectors on each level of the house?					
Discussed or created a utility shutoff procedure in the event of a natural disaster>					

8. Workplace Preparedness. Please check the box that is most accurate to indicate the activities that you or someone in your workplace has completed.

	Have Done	Plan to Do	Unable to Do	Need Help	Not Done	Don't Know
Attended/provided training on natural disasters or emergency preparedness at work?						
Talked with coworkers about what to do in case of a natural disaster or emergency?						
Developed a "Workplace Emergency Plan" that identifies what everyone does in a disaster?						
Prepared a disaster "go" kit—one that you can take with you in case of evacuation from your						
Prepared a 3-day supply of water, food, medicine, and other basic essentials for employees?						
Prepared a 14-day (or more) supply for employees in case of a major disaster?						

Been trained in First Aid or Cardio-Pulmonary Resuscitation (CPR) in the last year?						
Installed smoke and carbon monoxide detectors in each area of the facility?						
Discussed or created a utility shutoff procedure in the event of a natural disaster?						

9. How did you learn about this survey?

- | | |
|---------------------------------------|--|
| <input type="checkbox"/> Social Media | <input type="checkbox"/> Word of mouth |
| <input type="checkbox"/> Website | <input type="checkbox"/> Radio |
| <input type="checkbox"/> Newspaper | <input type="checkbox"/> Other |
| <input type="checkbox"/> Email | |

10. Did you participate in the development of the Clatsop County 2008 or 2015 NHMP process in any of the following ways? *Select all that apply.*

- | | |
|---|---|
| <input type="checkbox"/> Yes, I was a member of the Hazard Mitigation Planning Committee. | <input type="checkbox"/> No, I did not participate but I was aware of the plan and followed development through the news media. |
| <input type="checkbox"/> Yes, I attended a public meeting. | <input type="checkbox"/> No, I did not participate in any way. |
| <input type="checkbox"/> Yes, I commented on the Draft Plan. | |

11. Are you participating in the development of the Clatsop County 2021 Plan Update in any of the following ways? *Select all that apply.*

- | | |
|--|---|
| <input type="checkbox"/> Yes, I am a member of the Hazard Mitigation Planning Committee. | <input type="checkbox"/> No, I have/will not participate but I was aware of the plan and followed development through the news media. |
| <input type="checkbox"/> Yes, I attended/want to attend a public meeting. | <input type="checkbox"/> No, I have/will not participate in any way. |
| <input type="checkbox"/> Yes, I will comment on the Draft Plan. | |

12. Please share any other comments, questions, or concerns you would like the Clatsop County NHMP Steering Committee to consider.

Thank you for participating. If you want to stay informed, provide your contact information below. Clatsop County and participating jurisdictions will only use this information in order to contact you or to respond to your questions and comments. We will not share this information.

Name: _____

Address: _____

E-mail: _____

Phone: _____

Return completed written surveys to:
Clatsop County Emergency Management
800 Exchange Street, Suite 410
Astoria, OR 97103

Email scanned or electronic surveys to:
clatsopemd@co.clatsop.or.us

SURVEY MUST BE COMPLETED NO LATER THAN FRIDAY, JANUARY 15, 2020