



TOWN OF NORTH BRENTWOOD

EMERGENCY PREPAREDNESS QUESTIONNAIRE

Helping the Town prepare to assist residents during an emergency

Please complete this questionnaire and return it to: North Brentwood Town Hall
4009 Wallace Road
North Brentwood, Maryland 20722.

RESIDENT INFORMATION

Date: _____ Name: _____

Address: _____

Home Phone: _____ Mobile Number: _____

Email Address: _____

EMERGENCY CONTACT

Name: _____ Phone: _____

HOUSEHOLD INFORMATION

Number of Adults in Household: _____

Adult Age Ranges (check all that apply): 18–35 ☐ 36–45 ☐ 46–55 ☐ 56–65 ☐ 66–75 ☐ 75+ ☐

Number of Children in Household: _____

Children's Age Ranges (check all that apply): Infant–2 ☐ 3–7 ☐ 8–10 ☐ 11–12 ☐ 13–17 ☐

ACCESSIBILITY & SPECIAL ASSISTANCE

Are any household members disabled or in need of assistance during an emergency? Yes ☐ No ☐

If yes, how many? _____

Turn Page Over ➡

Preferred / safest emergency exit location: Rear ☐ Front ☐ Other: _____

Special needs (examples: hearing assistance, wheelchair access, diabetes, blindness, etc.):

Is a caregiver needed? Yes ☐ No ☐

Do you have pets? Yes ☐ No ☐

If yes, type and number of pets: _____

COMMUNICATION PERMISSION

☐ Check here to allow the Town to contact you regarding Town meetings and events.

CONFIDENTIALITY NOTICE

The information provided on this form is strictly confidential and is intended only for emergency preparedness purposes by the Mayor and Council of the Town of North Brentwood to help support resident safety during an emergency.

Thank you for helping North Brentwood prepare for emergencies.