**Flooding Questionnaire**

Village of Island Park

Repetitive Loss Area Analysis (RLAA)

Dear Resident:

**The Village is applying to be a member of the Federal Emergency Management Agency’s (FEMA’s) Community Rating System (CRS) program.** Incentives for participation include flood insurance premium discounts for residents with flood insurance. As part of this program, the Village is preparing a Repetitive Loss Area Analysis (RLAA).

The purpose of an RLAA is to generate mitigation solutions for individual streets or areas, in contrast to a hazard mitigation or floodplain management plan, which examines community-wide flooding problems and solutions. The Building Department and/or Walden Engineering (Village Engineer) will be inspecting the exterior of each building in the RLAA. **We will be looking at the type and condition of your foundation, local drainage patterns and whether mechanical equipment is elevated.** Once the analysis is complete, a copy of the report can be obtained from Doug Groth, Floodplain Manager. He may be reached at 516-431-0600 for a digital or hard copy. The document will also be available on the Village website, <http://villageofislandpark.com>.

**It would greatly assist the planning effort if we had information on flooding issues that you have experienced while residing in the Village.** This information will only be used for internal planning purposes and **will not be distributed**. Please mail this questionnaire back to the Village Building Department at 127 Long Beach Road, Island Park, NY 11558 **within 7 days**.

Property Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Information: (Name)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Phone)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company Name: (If Applicable)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Has your building/home or property ever been flooded? ( ) Yes ( ) No

If “yes”, please complete this entire questionnaire.

If “no”, please complete questions 6 – 9.

1. In what years (or on what dates) did it flood?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Where did you get water and how deep did it get?

( ) In basement (if applicable):\_\_\_\_\_\_\_\_\_\_\_\_\_\_feet deep

( ) In crawl space (if applicable):\_\_\_\_\_\_\_\_\_\_\_\_\_feet deep

( ) Over first finished floor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_feet deep

( ) On land only: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_feet deep

( ) Water kept out of building by sandbagging, sewer valve, other measure.

1. What do you feel was the cause of your flooding? Check all affecting your building.

 ( ) Storm sewer backup ( ) Sanitary sewer backup

 ( ) Standing water next to house ( ) Sump pump failure/power failure

 ( ) Saturated ground/leaks in basement walls

 ( ) Sea surge or wave action

 ( ) Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Have you installed any flood protection measures on your property?

( ) Sump pump ( ) Backup power system/generator

( ) Sewer backup valve ( ) Elevated critical utilities

( ) Waterproofed walls ( ) Moved things out of basement or crawlspace

( ) Regraded property to keep water away from building/home/property

1. When did you move into or occupy the home/building? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. What type of foundation does your building have?

( ) Slab on Grade ( ) Crawlspace ( ) Basement

1. Do you have flood insurance?

( ) Yes ( ) No

1. Do you want information on protecting your building from flooding?

( ) Yes ( ) No

If yes, please include your name and full mailing address.

Please include any additional comments, photos (place name and address on each so they can be returned if requested), relevant correspondence, or any other documents that you believe may aid our efforts.

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