Community Disaster Resilience Planning Guide Resources

Community Profile Template

Community Profile Template

This is a template to help you collect and document your findings as you build your Community Profile. Various tables and other means of displaying information are provided for your use, but you should feel free to adapt the format to suit you and your community's needs.

History

The first recorded history of our community is in: _____

At that time, our community was based on:

_____

_____

_____

Since then, our community has faced a number of challenges:

_____

_____

_____

_____

_____

_____

Since then, our community has also taken a number of positive steps:

_____

_____

_____

_____

_____

_____

Today, we would describe our community as a community where:

- ☐ The economy is thriving
- ☐ The economy is keeping its own
- ☐ The economy is struggling
- ☐ Most young people stay in the community
- ☐ Most young people leave the community but eventually return
- ☐ Most young people leave and don't return to the community to live
- ☐ Most people volunteer for one or more organizations
- ☐ Some people volunteer for one or more organizations
- ☐ Few people volunteer for one or more organizations
- ☐ Newcomers feel welcome
- ☐ Newcomers are accepted but not necessarily made to feel welcome
- ☐ Newcomers feel unaccepted
- ☐ Everyone knows everyone – people talk to each other
- ☐ Most people know most of the other residents – people generally talk to each other
- ☐ People tend to stick to themselves and don't communicate much
- ☐ People are very accepting of new ideas
- ☐ The predominant language spoken in our community is_____
- ☐ People are reluctant to hear new ideas

Other comments:

_____

_____

_____

_____

_____

_____

Population

Some of the key population data for our community is:

Age

	Males	Females	Totals
Children 0-4			
Children 5-9			
Children 10-14			
Children 15-19			
Adults 20-29			
Adults 30-64			
Seniors 65- 74			
Seniors 75-84			
Seniors 84+			
Totals			

Vulnerable Population

This area is crucial for support requirements during community emergency evacuations.

Health Concerns	**Males**	**Females**	**Totals**
Ambulatory			
Respiratory Issues			
Special Needs			
Totals			

Note: Please add applicable health concerns as needed to chart.

Number of Households

	#		%
One Person		Owned	
Two Persons		Rented	
Three Persons		Band Housing	
Four Persons +		Subsidized	
Totals			

Marital Status

	#	%
Single		
Married		
Separated		
Divorced+		
Widowed		
Totals		

Families

	#	%
Husband-Wife Married Without Children at Home		
Husband-Wife Married With Children at Home		
Common-Law Couples Without Children at Home		
Common-Law Couples With Children at Home		
Single Parent Families Male Parent		
Single Parent Families Female Parent		
Totals		

Indigenous Identity

Indigenous Identity	#	%	From a different Nation or community
Metis			
Inuit			
First Nations			
Non Indigenous			

Traditional Language

	#	%
Non-English Languages		
List of Languages – How many Languages are in your community		

Labour Force Activity

	#	%
Employed		
Unemployed		
Not in Labour Force		
Common-Law Couples With Children at Home		
Social Assistance		
Unemployment Rate		
Totals		

Minorities

	#	%
Minority		
List of Minorities		

Occupations

	#	%
Sales & Service		
Business, Finance & Administration		
Unique to Primary Industry		
Trades, Transport & Equipment Operations & Related		
Natural & Applied Sciences & Related		
Management		
Social science, Education, Government Service & Religion		
Art, Culture, Recreation & Sport		
Health Occupation		
Unique to Processing, Manufacturing & Utilities		
Totals		

Highest Level of Education

	#	%
No Certificate, Diploma or Degree		
High School or Equivalent		
Apprenticeship/Trades		
College, CEGEP or Other		
University, No Degree		
University, Bachelor's or Higher		
Totals		

Prevalence of Low Income

All Economic Families *Economic Family means two or more persons living in the same dwelling, related to each other by blood, marriage, common-law or adoption*	#	BC
Before-Tax Low Income		
After Tax Low Income		
Couple Economic Families		
Before-Tax Low Income		
After Tax Low Income		
Male Lone-Parent Economic Families		
Before-Tax Low Income		
After Tax Low Income		
Female Lone Parent Economic Families		
Before-Tax Low Income		
After Tax Low Income		
Persons 15+ not in Economic Families		
Before-Tax Low Income		
After Tax Low Income		
Persons Less Than 6 Years Old		
Before-Tax Low Income		
After Tax Low Income		
Persons 65Years and Older		
Before-Tax Low Income		
After Tax Low Income		

Residency

	#	%
Non-Movers		
Moved in Last Year		
From other Provinces		
From Outside Canada		
Totals		

Total Income

	#	BC
Median Total Income		
Males, 15+ with Income		
Females, 15+ with Income		
Males 15+ with Income		
Under $10,000		
$10,000-29,999		
$30,000-$39,999		
$40,000-$59,999		
$60,000 and over		
Average Total Income		
Females 15+ with Income		
Under $10,000		
$10,000-29,999		
$30,000-$39,999		
$40,000-$59,999		
$60,000 and over		
Average Total Income		

Workplace & Transportation

	#	%
Car/Truck/Van as Driver		
Car/Truck/Van as Passenger		
Walked		
Bicycle		
Motorcycle		
Taxicab		
ATV		
Snow Mobile		
Traditional Methods – Dog Sleds, Horseback		
Canoes/Boats, Air		
Totals		

**Note that in some cases the “official” census information may not be totally accurate and some remotely located residents may have been missed. If that is the case in your community try to capture those not counted in the census.

Businesses and Services

Community Businesses

Over 100 businesses have been located in small, rural communities and this list is likely similar in Indigenous communities. Review all of these services and identify any businesses that may provide these services in your community.

Airport & Aircraft Services Architect Art & Crafts Attractions Automotive & Related Bed & Breakfast Boating , Kayaking , Rafting & Canoeing Bookkeeping & Financial Services Bakery Books Butcher & Meat Cutting Cabling Camera Camping Car Rentals Carvers Casino Catering Clothing Communication – Cell Phones, Phones Computer & Related Construction - Building Construction - Home Construction – Road Consulting Services Counselling & Psychology Cultural Experiences Cycling Services Dancing Lessons Daycare Dental Services Drywall Electrical Engineering Farming & Ranching Fishing & Guides Fishing Charters	Food & Wine Forestry & Logging Funeral Services Furnace & Related Garden & Nursery Gas Station General Store Golf Club Gravel Groceries Hair Salon Hardware Health Centre Health Services – Nutrition, Naturopath, Heating Fuel Hiking Historical & Cultural Home Inspections Home Renovations & DecoratingHotel, Motel Housewares Hunting Outfitters Hunting Services Landscaping Laundromat Lawyer, Notary Liquor Store Marinas Market Medical Clinic Mini-Golf Movies Museum Musical Instruments Musical Lessons Nails Newspaper Nursing & Homecare Pawn Shop Pets & Pet Services	Pharmacy & Medical Supplies Photography Plumbing Printing & Photocopying Pub Real Estate Rentals Repairs Resort Restaurant Sawmill Seniors' Services Septic Tank Services Signage Skiing & Related Snowmobile & Related Sports & Related Stationary Surveyors Television, Radio Theatre & Performing Arts Therapists – Massage, Physiotherapist Tires Tobacco Tourism Bookings Towing Training Transportation Trucking Vehicle Repairs Vehicle Sales Veterinarian Video Rental Water Supplies Weddings & Banquets Wildlife Watching Wood Products

Use this table to list existing businesses.

Type of Business	Name of Business	# of Employees	Location

Economic Development and Economic Sectors

Within your community boundaries, reserve lands, or traditional territory do you have

Significant Crop Production (farms)

☐ Yes ☐ No ☐ Don't Know

If yes, where are they? (these areas should also be included on your Community Map)

_____

Significant Farming (e.g., Dairy)

☐ Yes ☐ No ☐ Don't Know

If yes, where are they? (these areas should also be included on your Community Map)

_____

Significant Ranching

☐ Yes ☐ No ☐ Don't Know

If yes, where are they? (these areas should also be included on your Community Map)

_____

Significant Logging

☐ Yes ☐ No ☐ Don't Know

If yes, where are they? (these areas should also be included on your Community Map)

_____

Significant Forest Industry (e.g., Mill)

☐ Yes ☐ No ☐ Don't Know

If yes, where are they? (these areas should also be included on your Community Map)

_____

Significant Mining

☐ Yes ☐ No ☐ Don't Know

If yes, where are they? (these areas should also be included on your Community Map)

_____

Significant Oil and/or Gas Exploration/Development

☐ Yes ☐ No ☐ Don't Know

If yes, where are they? (these areas should also be included on your Community Map)

_____

Significant Fishing

☐ Yes ☐ No ☐ Don't Know

If yes, where are they? (these areas should also be included on your Community Map)

_____

Significant Farm Fishing

☐ Yes ☐ No ☐ Don't Know

If yes, where are they? (these areas should also be included on your Community Map)

_____

Significant Trapping

☐ Yes ☐ No ☐ Don't Know

If yes, where are they? (these areas should also be included on your Community Map)

_____

Significant Harvesting of Wildlife

☐ Yes ☐ No ☐ Don't Know

If yes, where are they? (these areas should also be included on your Community Map)

_____

Significant Provincial/Territorial Presence

☐ Yes ☐ No ☐ Don't Know

If yes, where are they? (these areas should also be included on your Community Map)

_____

Significant Tourism

☐ Yes ☐ No ☐ Don't Know

If yes, where are they? (these areas should also be included on your Community Map)

_____

If yes, is tourism seasonal?

☐ Summer ☐ Winter ☐ All Year ☐ Event-Based

_____

Significant Other Economic Activity _____

If yes, where are they? (these areas should also be included on your Community Map)

_____

Community & Recreational Services

These are some services that may be offered by your community. Key sites should be included on your community map.

Type of Service	Location	Activity / Hours of Operations
Cemetery		
Community Centre		
Recreation Centre		
Curling		
Garbage Collection		
Golf Club		
Ice Rink & Skating		
Library		
Local Park		
Playing Fields		
Road Services		
Swimming		
Walking and Hiking Trails		
Youth/Elder/Senior Centers		

Financial Services

Financial services are involved with providing cash, lending, and borrowing services. Use this form to list existing financial services/businesses.

Type of Service	Name of Business	Distance from Community	Location
Bank			
Credit Union			
ATM			

Government Services

Here are some of the more common government services for you to consider.

Type of Service	Nearest Location	Distance from Community	Hours of Operations
Child Welfare			
Court Services			
Employment Services			
Family Services			
Health Care Centres			
Passport & Immigration Services			
Probation Services			
Services for the Disabled			
Post Office			
Other			

Health Services

These are some of the more commonly used health services – list other services that your community uses frequently. Local services should be included on your Community Map.

Type of Service	Nearest Location	Distance from Community	Hours of Operations
Acute Care			
Addiction Services			
Mental Health Services			
CT Scan			
Dental Services			
Doctor (Family)			
Doctor (Specialist)			
Doctors (Specialists)			
Emergency Medical			
First Aid			
Geriatric Care			
Home Care			
Immunizations			
Kidney Dialysis			
Medical Clinic			
Mid-wife or Birthing Services			
MRI			
Occupational Therapy			
Palliative Care			
Physiotherapy			
X-Ray Lab			
Other			

Educational Services

The following list is to identify educational services in the community – these should be included on your community map.

Type of Business	Name of Facility	Nearest Location	Distance from Community	Numbers
Pre-School/Headstart				
Kindergarten				
Elementary School				
Middle School				
High School				
Training or Business School				
College				

Geography and Land Use

Within your community boundaries do you have:

Steep slopes with unstable soils

☐ Yes ☐ No ☐ Don't Know

If yes, where are they? (these areas should also be included on your Community Map)

_____

A river or stream

☐ Yes ☐ No ☐ Don't Know

If yes, where are they? (these areas should also be included on your Community Map)

_____

Have the flood plains been identified?

☐ Yes ☐ No ☐ Don't Know

If yes, where are they? (these areas should also be included on your Community Map)

_____

Homes or businesses next to, or surrounded by, forests?

☐ Yes ☐ No ☐ Don't Know

If yes, where are these forested areas? (these areas should also be included on your Community Map)

_____

Soils subject to liquefaction in an earthquake?

☐ Yes ☐ No ☐ Don't Know

If yes, where are they? (these areas should also be included on your Community Map)

_____

Earthquake fault lines?

☐ Yes ☐ No ☐ Don't Know

If yes, where are they? (these areas should also be included on your Community Map)

_____

Is your community subject to extreme weather, blizzards, white-outs, tornados or damaging winds?

☐ Yes ☐ No ☐ Don't Know

If yes, where are those routes? (these routes should also be included on your Community Map)

_____

Do hazardous materials travel through your community?

☐ Yes ☐ No ☐ Don't Know

If yes, where are those routes? (these routes should also be included on your Community Map)

_____

Has there been any erosion of soils around waterways or waterfront in your community? (e.g., eroding shorelines)?

☐ Yes ☐ No ☐ Don't Know

If yes, where are those routes? (these routes should also be included on your Community Map)

_____

Vegetation and Wildlife

Have you noticed any changes to the vegetation, insects or wildlife in or surrounding your community?

☐ Yes ☐ No ☐ Don't Know

Has there been an increase or decrease in the number of trees?

☐ Yes ☐ No ☐ Don't Know

If yes, what has changed and where are these areas? (these areas should also be included on your Community Map)

_____

_____

Has there been an increase or decrease in the vegetation?

☐ Yes ☐ No ☐ Don't Know

If yes, what has changed and where are these areas? (these areas should also be included on your Community Map)

_____

_____

Has there been an increase or decrease in the number or types of birds? (e.g., eagles)

☐ Yes ☐ No ☐ Don't Know

If yes, what has changed and where are these areas? (these areas should also be included on your Community Map)

_____

_____

Has there been an increase or decrease in the number or types of wildlife? (e.g., deer, moose, bears)

☐ Yes ☐ No ☐ Don't Know

If yes, what has changed and where are these areas? (these areas should also be included on your Community Map)

_____

_____

Has there been an increase or decrease in the number or size of fresh water fish? (e.g., trout)

☐ Yes ☐ No ☐ Don't Know

If yes, what has changed and where are these areas? (these areas should also be included on your Community Map)

_____

_____

Has there been an increase or decrease in the number or size of salt water fish? (e.g., salmon)

☐ Yes ☐ No ☐ Don't Know

If yes, what has changed and where are these areas? (these areas should also be included on your Community Map)

_____

_____

Has there been an increase or decrease in the number or size of shellfish? (e.g., oysters, shrimp)

☐ Yes ☐ No ☐ Don't Know

If yes, what has changed and where are these areas? (these areas should also be included on your Community Map)

_____

_____

Has there been an increase or decrease in the number of bees?

☐ Yes ☐ No ☐ Don't Know

If yes, what has changed and where are these areas? (these areas should also be included on your Community Map)

_____

_____

Has there been an increase or decrease in the number of insects, birds, fish and/ or wildlife impacted by contamination?

☐ Yes ☐ No ☐ Don't Know

If yes, where are they? (these areas should also be included on your Community Map)

_____

_____

Has there been an increase or decrease in the vegetation, plants, moss, grasses, and trees being affected by contaminants and/or insects?

☐ Yes ☐ No ☐ Don't Know

If yes, where are they? (these areas should also be included on your Community Map)

_____

Climate

This section is for you record the average temperatures and rainfall in your community.

Month	Average Temperature	Average Precipitation
January		
February		
March		
April		
May		
June		
July		
August		
September		
October		
November		
December		

Have maximum temperatures been recorded in the last three years? ☐ Yes ☐ No

Details: _____

_____

Have minimum temperatures been recorded in the last three years? ☐ Yes ☐ No

Details: _____

_____

Have blizzards, whiteouts, and tornados or damaging winds been recorded in the last three years? ☐ Yes ☐ No

Details: _____

_____

Community Infrastructure

Answer the questions that are included for each of these sections.

Communication and Information Technology (IT)

Are there any communication towers in or nearby to your community?

☐ Yes ☐ No ☐ Don't Know

If yes, where are they? (these towers should also be included on your Community Map)

_____

Where are the main phone trunk lines to your community? (these sites should also be included on your Community Map)

_____

Does your community have high-speed internet?

☐ Yes ☐ No ☐ Don't Know

If yes, where are the main internet cables to your community? (these areas should also be included on your Community Map)

_____

Does your community have a mobile satellite connection?

☐ Yes ☐ No ☐ Don't Know

If yes, where is the equipment located?

_____

Does your community have cell phone coverage?

☐ Yes ☐ No ☐ Don't Know

If yes, what area is covered? (i.e. is the entire community covered, are there dead zones?)

_____

Does your community have a community radio station?

☐ Yes ☐ No ☐ Don't Know

If yes, where is the broadcasting located?

_____

If yes, how is the station accessed?

_____

Does your community ever lose communication with the outside world?

☐ Yes ☐ No ☐ Don't Know

If yes, how widespread is the coverage in your community?

_____

Does your community have television coverage?

☐ Yes ☐ No ☐ Don't Know

If yes, is television by antennae, cable or satellite?

_____

If yes, how widespread is the coverage in your community?

_____

Is your community infrastructure insured?

☐ Yes ☐ No ☐ Don't Know

Does your community have an up-to-date inventory of its infrastructure, which identifies age, condition, remaining years of service, required repairs etc.

☐ Yes ☐ No ☐ Don't Know

Electricity

Where are the main hydro lines to your community? (these sites should also be included on your Community Map)

_____

Does your community have a local power generating station?

☐ Yes ☐ No ☐ Don't Know

If yes, where is it located in your community? (this site should also be included on your Community Map)

_____

Is there a hydro producing dam near your community?

☐ Yes ☐ No ☐ Don't Know

If yes, where is it located in your community? (this site should also be included on your Community Map)

_____

Does your community have a generator?

☐ Yes ☐ No ☐ Don't Know

If yes, where is it located in your community? (this site should also be included on your Community Map)

_____

Do the main buildings in your community have generators for back-up in case of a power outage?

☐ Yes ☐ No ☐ Don't Know

If yes, where are they? (these areas should also be included on your Community Map)

_____

Do the main buildings in your community have an alternate source of heat in case of a power outage?

☐ Yes ☐ No ☐ Don't Know

If yes, where are they? (these areas should also be included on your Community Map)

_____

Does your community experience power outages? Are they documented? (length of time, quadrant or area of the community)

☐ Yes ☐ No ☐ Don't Know

Does someone local deal with power outages, or is it necessary for someone to travel to the community? Is it documented?

☐ Yes ☐ No ☐ Don't Know

Does your community use solar energy?

☐ Yes ☐ No ☐ Don't Know

If yes, where is it located in your community? (this site should also be included on your Community Map)

_____

Does your community use wind energy?

☐ Yes ☐ No ☐ Don't Know

If yes, where is it located in your community? (this site should also be included on your Community Map)

_____

Please list other sources of energy your community may utilize (example –wood burning power generation)_____

_____

Water

Does your community have clean drinking water?

☐ Yes ☐ No ☐ Don't Know

If not, what is the cause?

_____

How often is the water condition checked?

_____

Does your community have a distributed water system?

☐ Yes ☐ No ☐ Don't Know

If potable water is delivered by truck, how often are water samples taken?

Is the water truck stored separate from the garbage and sewage trucks? Are measures taken to ensure there is no cross-contamination?

_____

_____

Does your community have a water treatment plant, with certified operators?

☐ Yes ☐ No ☐ Don't Know

If yes, where is it located in your community? (This site should also be included on your Community Map)

_____

Has the water systems gone dry in years past? Is it annually having problems??

☐ Yes ☐ No ☐ Don't Know

Does turbidity at certain times of the year cause boil water advisories? If so, how long do they usually last?

_____

Has the water system been unusual during emergency events, flooding?

☐ Yes ☐ No ☐ Don't Know

Is your community dependent on individual wells?

☐ Yes ☐ No ☐ Don't Know

Does your community have shared wells?

☐ Yes ☐ No ☐ Don't Know

If yes, where are located in your community? (these sites should also be included on your Community Map)

_____

Are there polluted waterways or lakes?

☐ Yes ☐ No ☐ Don't Know

If yes, where are they located in your community? (these sites should also be included on your Community Map)

_____

Is there a dam near your community?

☐ Yes ☐ No ☐ Don't Know

If yes, where is it located in your community? (this site should also be included on your Community Map)

_____

Sewage

Does your community have a sewage system?

☐ Yes ☐ No ☐ Don't Know

If yes, does your community have a sewage treatment plant?

☐ Yes ☐ No ☐ Don't Know

If yes, where is it located in your community? (this site should also be included on your Community Map)

_____

Does your community have a sewage lagoon?

☐ Yes ☐ No ☐ Don't Know

If yes, who maintains it and is maintenance logged?

_____

If yes, does your community have a sewage outflow pipe or discharge system?

☐ Yes ☐ No ☐ Don't Know

If yes, where is it located? (this site should also be included on your Community Map)

_____

Is your community dependent on septic tanks?

☐ Yes ☐ No ☐ Don't Know

Do you know where the septic tank waste is dumped?

☐ Yes ☐ No ☐ Don't Know

If yes, where is it located? (this site should also be included on your Community Map)

_____

During emergency events or local disasters has the sewage treatment system known to fail or cross contaminate with drinking water system?

☐ Yes ☐ No ☐ Don't Know

Landfill

Does your community have a nearby landfill site? If yes, who maintains it?

☐ Yes ☐ No ☐ Don't Know

If yes, where is it located in your community? (this site should also be included on your Community Map)

_____

If yes, are hazardous materials dumped in the landfill? If yes are there procedures in place – who maintains the landfill?

☐ Yes ☐ No ☐ Don't Know

If no, where is your community's garbage dumped?

_____

Are private companies using community lands for dumping commercial waste?_____

Does your community have a recycling program?

☐ Yes ☐ No ☐ Don't Know

If yes, where is the recycling plant located in your community? (this site should also be included on your Community Map)

_____

Gas & Oil

Do you have a gas or oil pipeline running through or nearby your community?

☐ Yes ☐ No ☐ Don't Know

If yes, where is it located? (this pipeline should also be included on your Community Map)

_____

Where are the main pipe connections to your community? (this connection should also be included on your Community Map)

_____

Does your community have any oil or gas drilling nearby?

☐ Yes ☐ No ☐ Don't Know

If yes, where is it located? (this site should also be included on your Community Map)

_____

Are there gas stations, oil and gas bulk storage tanks located in or around your community?

☐ Yes ☐ No ☐ Don't Know

If yes, where is it located? (this site should also be included on your Community Map)

_____

Transportation

Is your community linked to the outside by road? If yes, is it available year-round or seasonal?

☐ Yes ☐ No ☐ Don't Know

If yes, where are they? (these areas should also be included on your Community Map)

_____

Does your community have a major highway nearby?

☐ Yes ☐ No ☐ Don't Know

If yes, where is it located? (major roadways should also be included on your Community Map)

_____

If yes, are hazardous materials transported on this road?

☐ Yes ☐ No ☐ Don't Know

Is your community's access frequently blocked due to weather or other conditions?

☐ Yes ☐ No ☐ Don't Know

If yes, how often and why?

_____

Does your community have an airport or float plane landing area nearby?

☐ Yes ☐ No ☐ Don't Know

If yes, where is it located? (this site should also be included on your Community Map)

_____

Is there an alternate landing strip in the event of fire?

☐ Yes ☐ No ☐ Don't Know

If yes, where are they? (these areas should also be included on your Community Map)

_____

Does your community have a dock or marina nearby?

☐ Yes ☐ No ☐ Don't Know

If yes, where is it located? (this site should also be included on your Community Map)

_____

Does your community have train tracks nearby?

☐ Yes ☐ No ☐ Don't Know

If yes, where are they located? (the railway should also be included on your Community Map)

_____

If yes, are hazardous materials transported on this track?

☐ Yes ☐ No ☐ Don't Know

If yes, is there a train station in town?

☐ Yes ☐ No ☐ Don't Know

If yes, where is it located? (the station should also be included on your Community Map)

_____

Does your community have a bus station?

☐ Yes ☐ No ☐ Don't Know

If yes, where is it located? (this site should also be included on your Community Map)

_____

What other modes of transportation does your community use?

_____

Food

Is food delivered to your community?

☐ Yes ☐ No ☐ Don't Know

If yes, how is it delivered?

_____

Does your community have a grocery store?

☐ Yes ☐ No

Do you know how many days of food to meet community needs exist at any one time?

☐ Yes ☐ No ☐ Don't Know

If yes, how many days?

_____

Do you know if the food supply delivery is frequently affected?

☐ Yes ☐ No ☐ Don't Know

If yes, how often? And reason for delay?

_____

Does your community provide traditional food supplies for membership?

☐ Yes ☐ No ☐ Don't Know

List the types of foods?

_____ _____ _____
_____ _____ _____
_____ _____ _____

Will these food supplies support community membership for long durations, winter or only a few weeks?

How are these foods stored?? _____

Smoked ☐ Yes ☐ No

Canned or Jarred ☐ Yes ☐ No

Frozen ☐ Yes ☐ No

Dried ☐ Yes ☐ No

Community-Based Organizations (CBOs) And Events

As you read through each of these types of CBOs, list below any organizations or associations that may fit within that type of CBO.

Addiction and Recovery Groups Advisory Community Support Groups Animal Care Groups Anti-Crime Groups Block Building Groups Business Groups Charitable Groups and Charitable Drives Civic Event Groups Cultural Groups Disability Groups	Education Groups Elder Groups Environmental Groups Family Based Groups Faith Based Groups Health Based Groups Historical Groups Hobby Groups Men's Groups Mutual Support Groups Cubs, Scouts, Girl Guides Rangers Royal Canadian Legion Park Wardens	Mentoring Groups Neighbourhood Improvement Political Groups Recreational & Sports Groups Senior Groups Service Groups Social Groups Social Cause and Advocacy Groups Unions Veterans Groups Women Groups Youth Groups

Type of CBO	Name of CBO	# of Members	Location & Meeting Time

Community Events

Community events may revolve around seasons (e.g., Harvest Festival); around holidays or special days; around art or cultural events (e.g., music festival, powwows); or sporting events. List any community events that take place in your community.

Name of Event	Primary Purpose	Organizers	Location & Date	Numbers
	☐ For Residents ☐ For Residents & Visitors ☐ For Visitors			
	☐ For Residents ☐ For Residents & Visitors ☐ For Visitors			
	☐ For Residents ☐ For Residents & Visitors ☐ For Visitors			
	☐ For Residents ☐ For Residents & Visitors ☐ For Visitors			
	☐ For Residents ☐ For Residents & Visitors ☐ For Visitors			
	☐ For Residents ☐ For Residents & Visitors ☐ For Visitors			

Capacity Inventory Summary

Use this form to total up the numbers you receive from residents completing the Capacity Inventory.

Capacity	#s	Additional Items
Health		
Caring for the elderly		
Caring for the mentally ill		
Caring for the sick		
Caring for the physically disabled or developmentally delayed		
Bathing		
Feeding		
Preparing special diets		
Exercising and escorting		
Grooming		
Dressing		
Making the person feel at ease		
Clinical counselling		
Transporting		
Child care		
Pet/animal care		
Peer counsellor, lay counsellor		
Recreation		
Nursing or first aid		
Pastoral		
Teaching		
Office		
Typing		
Operating adding machine/calculator		
Filing alphabetically/numerically		
Taking and relaying phone messages		

Writing business letters (not typing)		
Composing press releases and public notices		
Receiving/placing phone orders		
Operating switchboard		
Keeping track of supplies		
Shorthand or speedwriting		
Bookkeeping		
Entering information into computer		
Word processing		
Excel spreadsheets		
PowerPoint web design		
Photoshop/photography software		
Corel draw/graphics software		
Desktop publishing		
Outlook/Email		
Other:		
Construction and Maintenance		
Painting		
Porch construction or repair		
Tearing down buildings		
Knocking out walls		
Wall papering		
Furniture repairs		
Repairing locks		
Building garages, homes, out buildings		
Bathroom repair and modernization		
Building room additions		
Tile work or masonry		
Installing drywall taping & mudding		
Plumbing replacement and/or repairs		
Electrical replacement and/or repairs		
Bricklaying & masonry		

Cabinetmaking		
Kitchen repair and modernization		
Furniture making and repairs		
Installing insulation		
Installing flooring		
Plastering		
Soldering & welding		
Concrete work (sidewalks) installing floor coverings		
Repairing chimneys		
Heating/cooling system installation		
Putting on siding		
Tuck pointing		
Cleaning chimneys (chimney sweep)		
Installing windows		
Carpentry skills		
Roofing repair or installation		
Window washing & installation		
Floor cleaning, waxing or mopping		
Washing and cleaning carpets/rugs		
Routing clogged drains		
Using a hand truck in a business		
Caulking		
General household cleaning		
Fixing leaky faucets and plumbing		
Planting & caring for gardens and lawns		
Pruning trees & shrubbery		
Cleaning/maintaining swimming pools		
Floor sanding or stripping		
Wood Stripping/refinishing		
Assembling furniture		
Food		
Catering		

Food preparation and storage		
Serving food to small numbers of people (under 10)		
Serving food to large numbers of people (over 10)		
Preparing meals for large numbers of people (under 10)		
Preparing meals for large numbers of people (over 10)		
Clearing/setting tables for large numbers of people (over 10)		
Washing dishes for large numbers of people (over 10)		
Operating commercial food preparation equipment		
Traditional food harvesting/gathering		
Traditional food preparation		
Meat cutting /field dressing game		
Meal planning and proper food storage		
Baking		
Child Care		
Caring for babies (under 1 year)		
Caring for children (1 to 6)		
Caring for children (7 to 13)		
Taking children on field trips		
Transportation		
Driving a car		
Driving a van		
Driving a bus		
Driving a taxi		
Driving a tractor trailer		
Driving a commercial truck		
Driving a vehicle /delivering goods		
Hauling debris/goods & supplies, large and small loads		
Operating farm equipment		
Operating heavy equipment (Cats, backhoes, graders)		
Driving an ambulance		

Ability to navigate/route find (map/compass proficient)		
Driving & operating fire apparatus		
Operating Equipment &Repairing Machinery		
Repairing radios, TVs, VCRs		
Tape recorders		
Repairing other small appliances		
Repairing snowmobiles/ATVs/power equipment		
Repairing automobiles		
Repairing trucks/buses		
Repairing/maintaining heavy equipment		
Repairing auto/truck/bus bodies		
Repairing/maintaining boats & planes		
Using a forklift		
Repairing large household equipment (e.g., refrigerator)		
Repairing heating & air conditioning system		
Operating plow truck/snow plow		
Operating a Backhoe Loader		
Operating a dump truck		
Fixing washers/dryers		
Repairing elevators		
Operating a crane		
Operating pumps		
Assembling items		
Disassembling items		

Supervision		
Writing reports		
Creating and filling out forms		
Planning work for other people		
Directing the work of other people		
Making a budget /tracking expenditures		
Keeping records of all your activities		
Interviewing people		
Policing/guarding/providing security		
Deploying people, resources and equipment		
Emergency scene management/ Incident Command (ICS)		
Sales		
Operating a cash register		
Selling products wholesale or for manufacturer		
Which products?		
Selling products retail		
Which products?		
Selling services		
Which products?		
How have you sold these products or services?		
Door to door		
Phone		
Mail		
Store		
Home		
Music and Art		
Singing		
Play an Instrument		
Dance Storytelling		

Drawing		
Oil Painting		
Watercolour		
Pottery		
Carving		
Stained glass		
Sculpting		
Weaving, beading or basket making		
Security and Safety		
Guarding residential property		
Guarding commercial property		
Guarding industrial property		
Armed guard		
Crowd control		
Ushering at major events		
Installing alarms or security systems		
Repairing alarms or security systems		
Wild land firefighting		
Firefighting		
Emergency Management (Incident Command-ICS or Emergency Operations Center-EOC)		
Search and rescue		
Other		
Upholstering		
Sewing		
Dressmaking		
Crocheting		
Knitting		
Tailoring		
Moving furniture or equipment to different locations		
Managing property		
Assisting in the classroom		

Hair dressing		
Hair cutting		
Manicuring nails		
Phone surveys		
Jewelry or watch repair		
Photography		
Interpreting or translating		
Spoken languages		
Read languages		
Written languages		
XIII. Skills		
Other skills that your household has which we haven't mentioned?		
Three things do you think your household does best?		
C. Skills that are good enough that other people would hire you to do them?		
D. Three skills your household would most like to learn?		
E. Skills anyone in your household would like to teach?		
F. Other special interests or activities that you have been involved in?		
G. Has anyone ever worked on a farm? If so, what did they do?		

H. 1. Has anyone in your household ever organized or helped organize any of the following community activities?		
1. Boy Scouts/Girl Scouts		
2. Church fundraisers		
3. Bingo		
4. School-parent associations		
5. Sports teams		
6. Camp trips for kids		
7. Field trips		
8. Political campaigns, council elections		
9. Block clubs		
10. Community groups		
11 Rummage sales		
12. Yard sales		
13. Church suppers		
14. Community gardens		
15. Community events		
16. Spiritual/traditional events or ceremonies		
17. Emergency response		
18. Canadian rangers		
H. 2. Would anyone in your household be interested in taking part in any of the following community activities?		
1. Boy Scouts/Girl Scouts		
2. Church fundraisers		
3. Bingo		
4. School-parent associations		
5. Sports teams		
6. Camp trips for kids		
7. Field trips		
8. Political campaigns, council elections		
9. Block clubs		
10. Community groups		

11 Rummage sales		
12. Yard sales		
13. Church suppers		
14. Community gardens		
15. Community events		
16. Rangers		
I. In case of an evacuation or disaster does your household own or have access to:		
1. Bicycle		
2. Car		
4-Wheel Drive		
3. Truck		
4-Wheel Drive		
4. ATV		
5.Snowmobile		
6. Boat (Describe type of vessel)		
7. Other Vehicle (Describe)		
7. Generator (Describe)		
8. Alternate Heat Source (Describe)		
9. BBQ		
10. First Aid Kit		
11. Chainsaw		
12. Mobile phone		
13. Computer or laptop		
14. Printer		
15. Photocopier		
16. Scanner		
17. HAM Radio (amateur radio)		
18. Water pumps		
19. Water hoses / sprinkler systems (lawn/garden)		

Governance/Council

Council Meetings are held: _____

	Name	Contact Info(email, phone/fax)
Mayor/Chief/Clan Leader		
Councillor		
Councillor		
Councillor		
Councillor		
Councillor		
Councillor		

Not Incorporated?
Regional District Meetings are held: _____

	Name	Contact
Elected Regional Representative		
Elected Regional Representative		
Elected Regional Representative		

Disaster and Emergency Management

Service agreements(MTSA or LOU/ MOU)

List the service agreements that your community has with any neighbouring communities or agencies.

(some are listed below, please add any additional)

	Yes/No	Writen or Verbal	Date agreement was signed
Fire			
Water			
Utilities			
Road Maintenance			
Emergency Management			

****Please Note: Attach any applicable agreements.***

Fire Services

List the services and resources that your community has.

	Name	Contact Info(email, phone/fax)
Fire Chief		
Deputy Fire Chief		

Fire Hall Address: _____

Fire Hall Contact Info _____

This should be included on your community map.

Fire Fighters

	Names	Contact Info
Paid – Full-time		
Paid – Part-Time		
Volunteer		

Essential Equipment (Vehicles, Supplies)

	#	Available through Agreement Y/N

Additional Information

The annual budget for fire services is: _____

Average response time: _____

Number of Calls: _____

Other Information:

_____

_____

Details of the Memorandum of Understanding and/or Agreement if service is provided by another community or agency.

Police Services

List the services and resources that your community has.

	Name	Contact Info(email, phone/fax)
Senior RCMP		
Deputy RCMP		

Police Station Address: _____
Telephone, Fax, Email

_____

This should be included on your community map.

Police Officers

	Names	Contact Info.
Paid – Full-time		
Paid – Part-Time		
Volunteer		

Essential Equipment (Vehicles, Supplies)

	#	Available through Agreement Y/N

Additional Information

The annual budget for police services is: _____

Average response time: _____

Number of Annual Calls: _____

Other Information:

_____

_____

Details of the Memorandum of Understanding and/or Agreement if service is provided by another community or agency.

Parks Canada

List the services and resources that your community has.

	Name	Contact Info(email, phone/fax)
Head Warden Contact		
Volunteer Contact		

Ambulance Station Address: _____
_____

This should be included on your community map.

Ambulance

List the services and resources that your community has.

	Name	Contact Info(email, phone/fax)
Ambulance Contact		
Alternate Contact		

Ambulance Station Address: _____
_____

Contact Info: _____

This should be included on your community map.

Paramedics

	Names	Contact Info
Paid – Full-time		
Paid – Part-Time		
Volunteer		

Essential Equipment (Vehicles, Supplies)

	#	Available through Agreement Y/N

Additional Information

The annual budget for ambulance services is: _____

Average response time: _____

Number of Annual Calls: _____

Other Information:

_____

_____

Details of the Memorandum of Understanding and/or Agreement if service is provided by another community or agency

Search & Rescue (SAR)

List the services and resources that your community has.

	Name	Contact Info(email, phone/fax)
SAR Team Leader		
SAR Deputy Team Leader		
Canadian Ranger Members		

SAR Headquarters Address: _____

Telephone, Fax & Email

_____

This should be included on your community map.

SAR Volunteers

Volunteer Name	Contact Info.

Essential Equipment (Vehicles, Supplies)

	#	Available through Agreement Y/N

Additional Information

The annual budget for SAR is: _____

Average response time: _____

Number of Annual Calls: _____

Other Information:

_____

_____

Details of the Memorandum of Understanding and/or Agreement if service is provided by another community or agency.

Marine Search & Rescue (MSAR)

List the services and resources that your community has.

	Name	Contact Info(email, phone/fax)
Marine SAR Coordinator		
Marine SAR Leader		

Marine SAR Headquarters Address: _____

_____

This should be included on your community map.

Marine SAR Volunteers

Volunteer Name	Contact Info.

Essential Equipment (Vehicles, Supplies)

	#	Available through Agreement Y/N

Additional Information

The annual budget for Marine SAR is: _____

Average response time: _____

Number of Annual Calls: _____

Other Information:

_____

_____

Details of the Memorandum of Understanding and/or Agreement if service is provided by another community or agency.

Road Rescue

List the services and resources that your community has.

	Name	Contact Info(email, phone/fax)
Team Leader		
Deputy Team Leader		

Road Rescue Headquarters Address: _____

_____

This should be included on your community map.

Road Rescue Volunteers

Volunteer Name	Contact Info.

Essential Equipment (Vehicles, Supplies)

	#	Available through Agreement Y/N

Additional Information

The annual budget for Road Rescue is: _____

Average response time: _____

Number of Annual Calls: _____

Other Information:

_____

_____

_____

Details of the Memorandum of Understanding and/or Agreement if service is provided by another community or agency.

Emergency Social Services (ESS)

List the services and resources that your community has.

	Name	Contact Info(email, phone/fax)

ESS Director		
Deputy ESS Director		

ESS Headquarters Address: _____

_____

This should be included on your community map.

ESS Volunteers

Volunteer Name	Contact Info.

Essential Equipment (Vehicles, Supplies)

	#	Available through Agreement Y/N

Additional Information

The annual budget for ESS is: _____

Average response time: _____

Number of Annual Calls: _____

Other Information:

_____

_____

_____

Details of the Memorandum of Understanding and/or Agreement if service is provided by another community or agency.

Amateur radio (Hams)

List the services and resources that your community has.

	Name	Contact Info(email, phone/fax)
Team Contact		
Alternate Contact		

Amateur Radio Headquarters Address: _____

_____

This should be included on your community map.

Amateur Radio Volunteers

Volunteer Name	Contact Info.

Essential Equipment (Vehicles, Supplies)

	#	Available through Agreement Y/N

Additional Information

The annual budget for Amateur Radio is: _____

Average response time: _____

Number of Annual Calls: _____

Other Information:

_____

_____

_____

Details of the Memorandum of Understanding and/or Agreement if service is provided by another community or agency.

Emergency Coordinator and Emergency Plan

	Name	Contact Info(email, phone/fax)
Emergency Coordinator		
Deputy Emergency Coordinator		

Emergency Operations Centre Address: _____

_____

This should be included on your community map.

Emergency Operations Centre Capacity

	#
Desks	
Computers, pens paper etc.	
Communications (e.g., phones, radios)	
Internet Access	
Fax Machine	
Photocopier	
Supplies/materials(white boards/status boards)	
Generator (backup power)	
Alternate heat source	
Washroom facilities	
Kitchen facilities (small)	
Refrigerator	
Sleeping facilities –rest areas	

Additional Information

The annual budget for Emergency Preparedness is: _____

Number of Activations: _____

Is there an Emergency Response Plan?

☐ Yes ☐ No

Has a Community Hazard, Risk and Vulnerability Assessment been completed?

☐ Yes ☐ No

When was the Emergency Response Plan last reviewed and updated? _____

When was the Emergency Response Plan tested/exercised? _____

Has the community applied for Emergency management funding?

☐ Yes ☐ No

Other Information:

_____

_____

_____

Details of the Memorandum of Understanding and/or Agreement if service is provided by another community or agency.

Hazards Information

Transfer the information from your Hazards Workbook.

Past Hazardous Events Which Occurred in Our Community

Type of Hazard	When	Location	Description of Event (Details, # of dead, injured or evacuated, cost)

These should be included on your community map.

Past Hazardous Events Which Occurred Outside of Our Community But Had a Direct Impact

Type of Hazard	When	Location	Description of Event (Details, # of dead, injured or evacuated, cost)

These should be included on your community map.

Hazards To Be Concerned About

Name of Hazard	Location	Concern

Changing Times

Have there been any population shifts over the past decade or so?

☐ Yes ☐ No ☐ No Don't Know

If yes, what has been the trend?

_____

Are there any other trends that you have identified?

_____

_____

_____

_____

_____

_____

_____