

Durango West #1 Wildfire Adapted Partnership **EVACUATION ASSISTANCE SURVEY**

Hello Neighbor-

Fire season can happen at any time in Colorado. Because of very dense oak and pine in DW1, we always have lots of fuel on the ground. With our steep hillside orientation as well as the forested nature of our area, La Plata County has determined that we are in an extremely high-risk area for fire. Durango West is fortunate to have 17 working fire hydrants, and a fire station on site, which is a huge plus for keeping insurance rates reasonable, however, safety is most important. Safe evacuation of residents is the main concern in the event of a fire, or another emergency such as a gas leak. As your neighbor and volunteer Wildfire Adapted Partnership Ambassador, this survey is part of our partnership with the county. **This information can greatly assist Durango Fire and Rescue Authority and the Sheriff's Department in the event of an evacuation.** Fire and law enforcement personnel is responsible to inform residents of an evacuation process, and they will be in charge of deciding if an evacuation is necessary. This survey can give rescue personnel quick information.

The purposes of this form is #1) gain advance knowledge of homes where special assistance might be needed and #2) to be able to contact you or your emergency alternate so you know what is going on. These forms are not part of billing records; the information you provide here is confidential & is kept separately for safety only.

PLEASE take a few minutes to complete the survey as accurately as possible. There are several ways to return the survey: **1)** we can fill in over the phone by calling DW1 office @ 259-4267, **2)** scan & return by email to [dwl1billing@mydurango.net](mailto:dwl1billing@mydurango.net), **3)** drop in payment box up front or the office drop slot, **4)** or, mail to Durango West Metro District #1, 119 Hollyhock Trail, Durango, CO, 81303.

**\*\*\*\*\*PLEASE RETURN AT YOUR EARLIEST CONVENIENCE\*\*\*\*\***

In the event that you have a household change in residents, or if a resident in the home becomes incapacitated due to illness or surgery, please notify the Durango West Office, 259-4267 so we can update your evacuation information. If the inability to drive or walk without assistance is temporary, please include approximate date of expected recovery and ability to drive. Phone service could easily be compromised during an emergency. We want to be sure rescue personnel have a quick list of everyone who may need extra help, and they have contact information for all residents if needed. We've had a couple of house fires and one serious gas leak in the past; these forms were proven to be very helpful to quickly contact those affected.

**We urge every household to return this form. Rescue personnel will want a quick count of people & pets if a fire is threatening your home.**

Thank you for providing this information. It could save lives!

*Durango West 1 Wildfire Adapted Partnership Member:*

*Kathy Phelps*

.....  
For information about wildfire preparedness, go to [www.wildfireadapted.org](http://www.wildfireadapted.org)

If you'd like to know more about our wildfire partnership, fire mitigation, or emergency planning, please contact our Ambassador Kathy Phelps, (970) 749-3188, or any staff member, (970) 259-4267

# EMERGENCY EVACUATION SURVEY    Date: \_\_\_\_\_

THIS INFORMATION IS CONFIDENTIAL AND WILL ONLY BE ACCESSED IF PEOPLE OR PROPERTY IS THREATENED  
PLEASE RETURN TO OFFICE OR DROP IN PAYMENT BOX AT FRONT ENTRANCE - THANK YOU!

Name(s): please list names of every person who lives in the home. If you do not reside in the home, please give your name and indicate Landlord. If you use a property manager also list name of the company.

---

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

Is this a: Primary Residence \_\_\_\_\_ Secondary residence \_\_\_\_\_ Rental \_\_\_\_\_

Phone: (day) \_\_\_\_\_ (evening) \_\_\_\_\_ (cell) \_\_\_\_\_

Please provide one or two emergency contacts with phone # in case we are unable to reach you:

---

- 1) \_\_\_\_\_ Total number of people living in household
- 2) \_\_\_\_\_ # of adults
- 3) \_\_\_\_\_ # over 65
- 4) \_\_\_\_\_ # of children under 15
- 5) \_\_\_\_\_ # of handicapped, disabled, or in need of assistance for evacuation
- 6) \_\_\_\_\_ # is anyone in the home using oxygen or life-sustaining medication
- 7) \_\_\_\_\_ # of pets    type of pet(s) \_\_\_\_\_
- 8) \_\_\_\_\_ # of pets    Indoor Only? \_\_\_\_\_ Outdoor Only? \_\_\_\_\_ Both \_\_\_\_\_
- 9) \_\_\_\_\_ # of operating vehicles on the property
- 10) \_\_\_\_\_ # of non-operating vehicles
- 11) Does your home use natural gas? \_\_\_\_\_    Where is the shut off location? \_\_\_\_\_

---

13) Do you have a propane gas grill? \_\_\_\_\_    Where is the grill located? \_\_\_\_\_

---

14) Any special information you feel emergency personnel should know? \_\_\_\_\_

---

*Return form to District Office: 119 Holly Hock Trail, Durango, CO 81303 or drop in payment box up front.*