

# Cumbria Floods 2015



## Business Impact Data Collection – Phase 1

The purpose of this form is to gather information on businesses which have been affected by the recent storms (directly or indirectly). The evidence is needed so that we can understand the extent of the impact and put appropriate support in place. We will also be feeding back data from the survey to agencies working to put recovery measures and funding in place. Please complete the form even if you don't currently need any support for your business as we need to collect as much supporting evidence as possible. (If you are a tourism business and have already completed a form from Cumbria Tourism, you don't need to complete this one.)

You can also complete this form online here: <https://www.surveymonkey.co.uk/r/Flood2015>

### Q1 Date of completion

### Q2 Name of contact person for business

### Q3 Trading name of business

### Q4 Usual address of business, including postcode:


### Q5 Current contact details for business:

Landline tel		Mobile tel	
Email:			

### Q6 What sector does the business operate in (tick one main activity)?

Agriculture / forestry / fishing	<input type="checkbox"/>	Information / communications	<input type="checkbox"/>
Utilities (eg gas, water supply)	<input type="checkbox"/>	Finance / insurance	<input type="checkbox"/>
Manufacturing	<input type="checkbox"/>	Property	<input type="checkbox"/>
Construction	<input type="checkbox"/>	Professional / scientific / technical	<input type="checkbox"/>
Motor trades	<input type="checkbox"/>	Business admin / support services	<input type="checkbox"/>
Wholesale	<input type="checkbox"/>	Public administration	<input type="checkbox"/>
Retail	<input type="checkbox"/>	Education	<input type="checkbox"/>
Transport /storage	<input type="checkbox"/>	Health	<input type="checkbox"/>
Accommodation / food services	<input type="checkbox"/>	Arts / entertainment / recreation	<input type="checkbox"/>

**Q7 How many employees does the business employ (write in number)**

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**Q8 What is the approximate annual turnover of the business (if known)?**

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**Q9 Has your business experienced any of the following effects (tick all that apply)**

Premises flooded / storm damaged	
Access to the business restricted	
Public transport affected	
Customers affected	
Suppliers affected	
Staff affected	
Other (please specify below)	

**Q10 What is the status of your business currently (tick one only)**

Ceased trading temporarily		Ceased trading permanently	
Limited trading from original premises		Limited trading from alternative premises	
Fully trading from original premises		Fully trading from alternative premises	

**Q11 If trading from alternative premises, what is the address?**


**Q12 If not trading fully, when do you expect to be fully running again (tick one only)?**

Within the next month		Longer than 6 months but within a year	
Within 2-3 months		Longer than a year	
Within 3-6 months		Plan to close business	

**Q13 If you can do so, please estimate the cost to your business of repairs, contents damage and loss of business – if you have not yet assessed the cost, please leave blank.**

<b>Repairs</b>	
<b>Contents</b>	
<b>Loss of business</b>	

