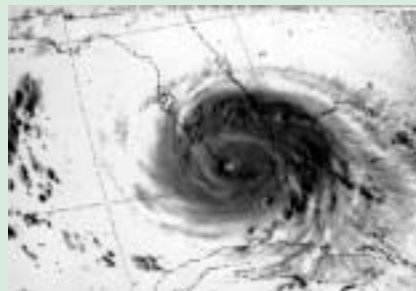
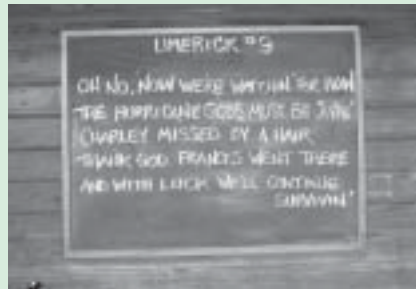




The Florida Dental Association's Five Step Guide for Disaster Preparedness & Recovery



This publication is supported by the Florida Dental Health Foundation and the American Dental Association Foundation.

ADA | FOUNDATION



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This publication is designed to provide accurate and authoritative information in regard to the subject matter covered. It is provided with the understanding that the publisher is not engaged in rendering legal or other professional services. If legal advice or other expert assistance is required, the services of a competent professional person should be sought.

Cover photos courtesy of the State Archives of Florida, Florida Department of State, Photographic Collection.

Dear Colleagues:

Frances. Charlie. Ivan. Jeanne. These are names Floridians long will remember. The devastation these storms left in their wake touched and adversely affected all Floridians, including many dentists. At the least, power outages interrupted practices. At worst, a few dentists lost their residences *and* their places of business.

Now is the time to prepare for the next hurricane season.

In 2004 the Florida Dental Health Foundation distributed a record amount of money – \$60,500 in grants and \$38,000 worth of loans – to help Florida dentists rebuild. In 2005, the Florida Dental Association decided to take a leadership role in minimizing the economic, physical and emotional impact hurricanes could cause in the future.

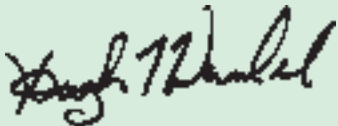
In partnership with the American Dental Association, the FDA developed this *Five Step Guide to Disaster Preparedness and Recovery*. The guide includes steps you should take to ensure your practice weathers the storm. It covers topics such as evaluating insurance coverage and your office's storm vulnerability; protecting your equipment, supplies and patient records; dealing with power failures, communication blackouts and evacuation; and emergency supplies you should purchase before hurricane season begins.

Although the guide is a response to the devastation Floridians experienced last year, we've offered it to the ADA as a national model – a model other states can use to create their own emergency plans, based on their individual needs and concerns. This is part of our commitment to the ADA.

Look for the guide on the FDA Web site, at floridadental.org/foundation/disaster.html, and in the 2005-2006 *Today's FDA Sourcebook*.

Please read this guide and put its ideas into action before the next violent storm strikes.

Sincerely,

A handwritten signature in black ink, appearing to read "Hugh T. Wunderlich". The signature is written in a cursive, somewhat stylized font.

Hugh T. Wunderlich, DDS
FDA Editor

From the day after the first storm, the American Dental Association and its Foundation were there, partnering with the Florida Dental Association and the Florida Dental Health Foundation to address our fellow dentists' various needs. Especially during times of crisis, the state/national association partnership takes on a special mantle.

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This Guide could not have been produced without the encouraging partnership of the ADA Foundation. During the horrific 2004 hurricane season their staff provided both moral and financial support to help Florida's Dental Charity assist Florida dentists who were adversely affected by the barrage of four consecutive hurricanes.

We would like to acknowledge the contributions of FDA Executive Director, Dan Buker, who asked that this value added service be offered to FDA members; Hugh Wunderlich, FDA Editor and FDA Component Executive Directors who assimilated information from their personal experiences in communicating and supporting their local member dentists during the 2004 disasters. We would be remiss if we failed to underscore the special contributions to the profession made by Lissette Adkins, Linda Broxton Lowell and Michael Dvorak.

The Board of the Florida Dental Health Foundation wishes to thank our principal author, Ms. Julianne Hare of Rabbit's Den Productions who went above and beyond along with FDA production staff: Cindy Holmes, Lynne Knight, Tom Norman, Cheri Sutherland, Heather Tozzi, Sandy Merrill and Suellen Wilkins.

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WEATHER FACTS

- According to a February 2005 report prepared by the Florida Office of Insurance Regulation, claims for damages caused by hurricanes Charley, Frances, Ivan and Jeanne during 2004 exceeded \$22 billion dollars.
- In 1998, seven tornados struck Central Florida, killing 42 people.
- The Florida Division of Emergency Management warns that 10 percent of the state's thunderstorms produce dangerous hail and/or high winds that can cause significant property damage and bodily harm.
- Inland, freshwater flooding can produce conditions that are every bit as deadly and damaging as "named" storm systems. In 1998, 20 inches of rain fell over West-Central Florida – drowning four people. Florida is third in the nation in flood damage claims processed through the National Flood Insurance Program.
- According to the U.S. Weather Service, lightning killed 3,696 people in the United States between 1959 and 2003. Of those, 425 fell in the Sunshine State.

INTRODUCTION

Florida is known for its abundant sunshine, mild temperatures and magnificent beaches. Our proximity to water also makes us vulnerable to dangerous weather patterns. Floridians experience more tropical storm systems than any other state in the union. Thirty-six percent of all U.S. hurricanes hit Florida. Weather experts classified more than half of those as major. Thunderstorms and tornados strike us when the jet stream swings south during the late winter and early spring. Florida also claims the title of America's lightning capital.

It's human nature to think bad things happen to other people – not us. But **thinking ahead to the possible is an important part of managing a crisis** if – and when – it does occur. Until we learn how to stop these destructive forces of nature, the best we can do is plan ahead to minimize their impact.

Studies indicate that almost half of the businesses that are forced to close because of a catastrophe never open again. Most of them did not have a disaster plan in place, or failed to implement it when danger threatened. **Proactive planning can mitigate loss, save lives and assure your practice continues to function** when it may be needed most. The time to plan for a crisis is now – you won't have the luxury of turning back the clock after damage has occurred.

Dozens of publications have been produced to help Floridians prepare for weather-related situations. Most of them focus on preparing the home and gathering supplies needed for personal and family survival. **This guide is specifically designed to address the unique needs and concerns of today's dental professional.** Our focus is on nature's wrath, but many of the same principles apply to any crisis management.

Creating a plan customized for your practice is simple. It will require time and thoughtful attention, but the results could pay off in real dollars saved. The following pages will take you step-by-step through the disaster planning process. You'll learn the five major steps to business survival and recovery.

FIVE STEPS TO BUSINESS SURVIVAL AND RECOVERY

- EVALUATE
- PLAN
- PREPARE
- RESPOND
- RECOVER

STEP ONE: EVALUATE

The first step in any planning process is to evaluate your current situation. Time is on your side now, but it won't be when the hurricane season begins or when a disaster is looming on the horizon.

Begin by gathering important documents and papers. Be sure to include:

- Insurance policies
- Building leases or mortgage documents
- Equipment leases and/or proof of purchase documentation

REVIEW YOUR INSURANCE COVERAGE

While proactive planning is your first line of defense in disaster protection, your insurance coverage may be your strongest armor. Florida law prohibits consumers from purchasing, or altering, coverage when a known event is already on the way. Evaluate your current coverage and make needed changes as soon as possible.

Review your policy until you understand what you already have. Jot down questions as they occur to you. If you occupy a leased facility, does the agreement specify who will make the determination regarding possible closure for repairs? If you own your building, would you receive insurance claim disbursements, or would they be processed through a mortgage company? Check all lease and purchase agreements for provisions that relate to disaster situations.

Does your policy provide sufficient coverage for today's replacement costs for lost contents, or will depreciation formulas leave you short? Does it include supplies, equipment and furnishings? Are some items subject to standard maximums, or do you need special coverage for computers, related software and other items you may own? Is leased equipment covered, or will you find yourself making periodic payments on equipment you no longer have?

Don't assume your fire and extended damage policy will protect you from all perils. Whether you own your own building, or lease your facility, you need to know what physical damage coverage is provided. Some policies do not cover wind, hurricane or flood damage.

Could you afford to do without income for an extended period of time? How long could your business survive if you could not operate from your current location? Could you continue your practice if you had a catastrophic loss of computer records, files, X-ray images or client files?

Business interruption insurance is one type of coverage that small business owners often overlook. Coverage offsets income lost when you are unable to operate from an insured location because of disaster-related damage. Compensation is calculated based on your financial history – so be prepared to provide documentation to back up your claim. Most policies exclude the first 48-72 hours. Insurers assume most business owners can absorb that much loss before they face serious risk. Policies written through FDA Services generally provide 12 months business interruption protection. Business interruption insurance also may pay for expenses that continue whether or not you are open for business – such as utility or telephone service – or provide you with funds for expenses related to doing business from a temporary location. It is added to your property insurance policy or written into a package plan. A word of caution – it will only protect you for perils that are named in your primary policy.

Your policy also may *exclude* protection against actions taken by civil authorities. Civil action may include being forced to evacuate; the power company cutting off service to a wide area to effect repairs; or the police closing roads leading to your location. You can request an endorsement that will meet the needs specific to your practice. If your office is located on a barrier island, you are at higher risk than if it is on a busy highway that will be among the first to be cleared of debris. Weigh your risks against the cost of additional coverage.

REMEMBER

Business interruption compensation is based on your business' *income* calculations – not on the amount you may bill out.



The Appendix includes a work sheet (see Work Sheets) to help you calculate income loss. Use it to determine the amount of business interruption coverage you should carry.

Extra Expense coverage offers another layer of protection that reimburses you for expenses that you may incur, over and above your regular operating costs, to *stay* in operation. If your office is intact after a disaster, but central power lines are down, this coverage might pay to bring in a generator that would allow you to continue operating. Generally, insurers will pay extra expense benefits *only* if those costs will be *lower* than paying for lost business.

Consider all options and discuss these possibilities with your insurance agent in advance.

- Is there suitable office space within your budget that you could move into temporarily?
- Have you negotiated a reciprocal agreement with another professional that might share space?
- Could you afford to move undamaged equipment or lease items temporarily? What would it cost to notify your patients of a change in location?
- Would your staff be able to report to the new site?

Some insurance companies will negotiate repairs directly on your behalf. Others will allow you to hire someone, but they will control disbursements. Make certain you know what your carrier's regulations and procedures are before you incur expenses you may not be able to recoup.

LIABILITY

Some kinds of storms are man-made, not natural. Your basic policy should provide coverage if a client trips on your front steps or is hurt on an open file cabinet. You probably carry protection for anything you, or an employee, may or may not do that puts a client at risk for bodily injury or other harm.

What if you are working under less than perfect conditions during or after a storm event?

Ask your agent if your current coverage will provide protection for contractors and employees that are performing duties outside their regular job descriptions.

DEDUCTIBLES / ADDITIONAL EXPENSE

Floridians submitted 525,726 claims for hurricane-related damage in 2004. Policyholders received more than \$22 million in covered benefits, but they also paid **\$54 million in deductibles**.

Even if you have secured business interruption insurance to offset lost profits, remember that such coverage is subject to a delay of 48 to 72 hours or more.

In the aftermath of a disaster, you may incur **incidental expenses** for such things as

- Batteries
- Ice
- Increased telephone toll
- Temporary repair supplies
- Bottled water
- Food and beverages for clean-up volunteers
- Fuel for generators

Do you have sufficient resources to cover additional costs and insurance shortfalls?

WHAT IS YOUR STORM VULNERABILITY?

Your evaluation should include an assessment of the **physical vulnerability of your surroundings**. The most effective way to ensure your business survives a natural disaster is to do everything possible to prevent damage to your:

- Facility
- Equipment
- Supplies and materials
- Important documents, critical records and patient information

You can **perform a simple inspection of your property**, or hire an expert to do it for you. This is the time to inventory and document your office contents. Take photos, create a video record and update your supply lists.

Secure one copy off site and maintain one for yourself. You may want to provide your insurer with a duplicate. Keep copies of equipment invoices that document model numbers, acquisition costs and other identifying information. Update your property records whenever you make a new purchase or eliminate stock.



The Appendix includes a sample of a basic inventory record (see Work Sheets).



FACILITY

Much of what you can do to protect your physical surroundings will depend on whether you own your building or lease it from someone else.

If you own your property:

Perform a thorough inspection of the building "envelope."

- Roof
- Walls
- Windows
- Doors

FDA Services Inc.

FDA Services Inc. is a multi-line insurance agency and wholly owned subsidiary of the FDA. They offer FDA members, and other association clients, a variety of insurance plans and services including:

- Property Insurance
- Business Owner's Policies, or BOPs
- Office Overhead Expense
- Professional Liability
- Workers' Compensation
- Automobile and Personal Umbrella Coverage
- Individual and Group Health
- Long Term Disability
- Individual Term Life
- Long Term Care
- Annuities
- Pension Services

For more information, contact FDAS at (800) 877-7597 or insurance@floridadental.org. Visit the FDAS Web site at www.fdaservices.com



Mobile homes and portable structures were the first to fall under the wrath of Hurricane Andrew in 1992. Photo courtesy of the State Archives of Florida, Florida Department of State, Photographic Collection.

Are there items outside your office that are potential hazards? Check the things attached to, or adjacent to, your building. Do you have signs, furniture or advertising items that could become dangerous, airborne projectiles? Is that charming awning a good marketing tool, or a potential liability? Could dislodged materials become barriers to rescue personnel?

Don't forget to look around the property for trees and other landscaping that need to be trimmed. The Red Cross recommends keeping commercial plantings to a minimum to reduce fire hazard. Trim branches before the hurricane season. Once an alert has been issued, municipalities may not be able to remove trimmings in time.

If there is a fire hydrant near your office, keep it clear of obstructions and debris.

Use a checklist as you inspect your office property. The one provided here is not intended to create a comprehensive building report. Instead, it focuses on items that are vulnerable to storm damage. In general, it should not take more than one hour to perform a "walk through" of your property. If you feel you need assistance, hire a certified inspector or other construction professional. Don't overlook "free" help such as a county extension agent or local fire marshal.



The Appendix includes a simple inspection checklist (see Work Sheets).

FACT

HOME INSPECTORS do not need to be licensed in Florida, but the state does require **BUILDING CODE INSPECTORS** to have a valid license. Reputable inspection firms are likely to belong to one or more of the major professional associations for certified inspectors.



The Appendix includes a list of these organizations. To check a contractor's license status, go to www.MyFloridaLicense.com or call (850) 487-1395.

IF YOU LEASE YOUR PROPERTY:

You still can use the provided inspection checklist, but share your observations with your landlord. Ask him or her to make needed repairs or modifications. It will protect the landlord's investment in the long run. You might want to consider adding a clause in your lease to provide for an annual disaster preparedness inspection.

EQUIPMENT

Do you keep **radioactive, hazardous, chemical or pharmaceutical supplies** on site? If you do, you and your staff are well aware of how dangerous it would be if the equipment's safety features were compromised through damage or loss of containment.

Be aware of your vulnerabilities.

- Install equipment in rooms that are protected as much as possible from incursions of wind, water and light.
- Be aware of EPA regulations regarding the storage of chemicals.
- Items such as nitrous oxide have a high street value for looters. Make certain you have a secure place to lock up pharmaceuticals if you have to evacuate your building. Keep the key with you.

SUPPLIES AND MATERIALS

Where do you store **paper products** that could be easily damaged by water?

Reams of paper and other administrative supplies are fairly inexpensive to replace, but supplies may be limited after a widespread storm. Consider keeping at least some of them in plastic boxes or sealable, plastic bags. **Gauze, syringes, face masks, cotton products and patient bibs** are just a few of the things that would be destroyed if subjected to water.

Keep a supply of record storage boxes on hand. You can purchase and store them flat, and they'll save valuable preparation time if you need to remove files quickly.

CRITICAL RECORDS AND PATIENT INFORMATION

What kinds of records do you keep regarding **patient history** and care? Where do you maintain **fiscal data**? Is your material computer-based or hand written? Do you have a system of backing up **electronic files**? Are they stored away from the office for safekeeping? Ideally, you will have a secure, off-site place to store duplicate records and computer backups. Loss-prevention specialists suggest you select a location at least fifty miles away. If you keep them nearby, consider purchasing fire-resistant, water-tight storage for critical files.

The average time needed to recover from a total loss of computer data varies from a matter of hours to two business weeks. This process can be delayed further if you have to find someone to do this after a widespread, catastrophic event. Data recovery is entirely dependent on how often, and how well, you performed backups. **Test your backup systems!** Many recovery plans have failed because operators thought they successfully copied files from one source to another, only to discover their backup disks were empty.

Dental film is particularly vulnerable to damage from light and water. The film is plastic, but it is treated with a gelatin-like substance in order to capture an image. It is vulnerable to improper and excessive handling, abrasions and folding. High humidity or moisture can cause mold and leave artifacts embedded into the emulsion the film was treated with. These artifacts cannot be removed. Even worse, full submersion can cause the film's coating to disband from the plastic – making all restoration efforts impossible. Consider producing duplicates that can be stored off site. There

are a number of vendors who supply equipment to make this task easy and affordable.



See the **Vendor Resource Guide** in the Appendix for contact information.

POWER FAILURES

Most of us think of electrical outages as an inconvenience, but how much revenue would you lose if your power systems were down for an extended period? Does your insurance policy cover this peril? Electrical components will have to be replaced if they are subjected to water. Temperature extremes will damage some types of electronic equipment, files and other materials. What would you lose if you lost your air conditioning?

You should give serious consideration to the **benefits of a backup power system**.

Generators are available in a wide variety of styles and price ranges. Your building's size and contents, and the power needs of your equipment, will determine the appropriate unit for you. Since this varies from office to office, you should consult an electrical specialist. Your local power company may offer this service at no charge, so check with them first.

There are **two basic types of generators – standby and portable**. Both will run as long as they have fuel.

- **Standby generators** are permanently installed and integrated into the building's electrical system. They are equipped with an automatic transfer switch that will activate auxiliary power when needed and shut it off when it isn't. This switch will prevent the unit from feeding power back into the utility lines and protect the generator when power is restored. Standby generators have fuel-driven engines that can be connected to a natural gas line, or run off the gasoline or diesel you supply. They must be installed by a licensed electrician, who will secure the necessary permits and notify the power company that the system is in place.
- **Portable generators** usually are smaller and generally are used to provide only the most vital service. Their capacity is measured in wattage. They have small fuel tanks that need to be re-filled periodically – usually every few hours.

Smaller units have pull-cord starters, much like a lawnmower. Some larger ones feature on/off switches that are easy to use.

The larger the generator, the more it will cost.

- **Small (4,000-5,000 watts)**
\$300-\$1,300
This size should power basic survival items, such as a refrigerator, sump pump, furnace fan, computer or small appliances.
- **Medium (6,000-9,000 watts)**
\$2,000-\$3,800
A medium-sized generator should supply most small office lighting, typewriters, computers, copiers, etc.
- **Large (10,000+ watts)**
\$8,000-more than \$10,000
Consult with your electrical specialist to determine what equipment you would be able to power.

Remember – all generators operate with gasoline or propane. These resources may be in short supply after a major storm. If you keep a supply on hand, make certain you can store it safely and in accordance with applicable regulations. Large, permanently installed units sometimes are connected to gas lines that may be shut down during a major disaster.



A work sheet to help you **calculate the value of purchasing a back-up generator** is included in the Appendix (see Work Sheets).

HELPFUL HINTS

- You can get a rough idea of how much back-up power you will need by checking your utility bill. One kilowatt equals 1,000 watts. Divide your average monthly power usage by the number of days per month your office is open. This will give you an idea of how much power you use on an average day, but it will not indicate peak usage.
- Every electrical appliance carries a label (usually on the cord) that will indicate the maximum wattage needed to operate it.
- For specialized equipment, such as an X-ray machine, check your owner's manual or consult with the vendor from whom you purchased it.
- Some electrical appliances and motors can be damaged if they are not pulling recommended minimums of power. It is important that the generator you select is of sufficient size to provide minimum current.
- **CAUTION:** Never plug an emergency generator into outlets or circuits that are connected to normal electrical systems. They could feed power back into delivery lines, putting emergency workers at risk.
- **CAUTION:** Gasoline-powered generators never should be used indoors because of the risk of carbon monoxide poisoning. They should be used outside only.

COMMUNICATION DEVICES AND NETWORKS

Cell-phone towers, computer networks and land-based phone systems might be down in the aftermath of an extreme weather event. How would you communicate with your employees in such an emergency? Will you be able to contact officials and those who can assist you? If the phones are working, will you spend most of your time making calls?

Establish a **central communications point** from which information can be gathered and disseminated. It could be a central location or a telephone number outside your exchange area. Make sure employees have the number and understand how and when to use it. Set up a relay system so each person called can notify another. If local systems are down, make contact with the Red Cross or one of the other rescue agencies. They usually supply a community with portable communications equipment as soon as possible.



In 1947, teletypes provided the fastest way of transmitting weather observations. Photo courtesy of the National Oceanic and Atmospheric Administration/Department of Commerce, NOAA Photo Library, Historic NWS Collection of Communications.

The National Association of Amateur Radio Operators also can help. Their volunteer **HAM radio** operators work through defined networks to transmit vital information. Get to know a volunteer in your area who can provide you with information now and vital assistance later.

The National Oceanic and Atmospheric Administration (NOAA) has established a nationwide network of radio stations that broadcast continuous weather information, as well as security alerts as they are issued by other government agencies. It is **critical that your office be equipped with a NOAA radio** that will automatically alert you to hazards. Make sure the model you purchase has a battery backup in case you lose power.



Today, we can collect weather data and broadcast it quickly over NOAA radio networks and the Internet. In spite of our advanced efforts, we still are subjected to unpredictable weather conditions. Photo courtesy of the National Oceanic and Atmospheric Administration/Department of Commerce, NOAA Photo Library, Historic NWS Collection of Weather Wonders.

A WORD ABOUT CHEMICAL, BIOLOGICAL AND RADIOLOGICAL (CBR) THREATS

There is nothing natural about a terrorist attack or a devastating industrial accident – but in today’s world, we must acknowledge the fact that we face potential hazards from chemical, biological and radiological (CBR) substances. There are steps we can take to lessen the possibility that they will occur, and things we can do to reduce their impact if they do. Many of the safety principles that apply to natural weather phenomena also apply to human-caused disasters. Keep this in mind as you perform your building inspection and prepare your disaster manual.

The National Institute for Occupational Safety and Health (NIOSH), under the auspices of the Centers for Disease Control (CDC), has published a document that offers tips for taking a proactive role in protecting yourself, and others, from CBR exposure. Entitled, *Guidance for Protecting Building Environments from Airborne Chemical, Biological, or Radiological Attacks*, the handbook was created especially for building owners and managers, but the information is useful to all of us. It is available online at <http://www.cdc.gov/niosh/bldvent/2002-139.html>, or you may order it from the CDC. Ask for DHHS (NIOSH) Pub No. 2002-139.

Here is a brief overview of some of the “dos and don’ts” the CBR guide contains:

DO

- Know your building
- Prevent access to outdoor air intakes
- Prevent access to mechanical areas
- Implement security measures, such as guards, alarms and cameras, to protect vulnerable areas
- Isolate lobbies, mail rooms, loading docks and storage areas
- Secure return air grilles
- Restrict access to building operation systems
- Restrict access to building information
- Upgrade general, physical safety features
- Have an emergency plan in place

DO NOT

- Permanently seal outdoor air intakes
- Modify the HVAC system without first understanding the effects on the building systems or the occupants
- Interfere with fire protection and life safety systems



Additional information sources are located in the Appendix under the Public Agencies/Organizations and Publications headings.

STEP TWO: PLAN

CREATE A WRITTEN PLAN

You have reviewed your insurance coverage, completed your vulnerability assessment, and thought about how you will deal with power outages and communication challenges. You understand your assets and have a clear idea of your existing support systems.

Now, you can **formulate a disaster response strategy** and put it in tangible form.

It is essential to have a **written plan**. It should be:

- **Dynamic** ■ **Flexible** ■ **Current**

Use a notebook that's suitable for storing written instructions and copies of necessary documents. Organize information by using tabbed sheet dividers to separate topics. It will save time when you need it later. Purchase a few inserts that have pockets so you can tuck loose papers and receipts inside them.

Create one section each for:

- **Valuable Documents Information:** You need to know where copies of your important papers are, but don't file confidential data where someone else could access it. This section should, however, include the names and contact numbers of landlords or lien holders. Be sure to note policy numbers and contact information in case you have to file a claim. Know where equipment manuals and warranties are stored.
- **Building Inspection Records:** File a copy of the inspection you performed and update it as necessary.
- **Inventory Records:** File the inventory you prepared and keep it up to date. Include photos and/or manufacturers' information.
- **Communications Plan:** Be specific about how you will notify employees and patients if your office must close. Write down how you will communicate with them before – and after – a disaster. Decide on a backup plan if central communication lines are disabled. Identify your off-site, central communication point. Use this section for your Telephone Contact List.
- **Transportation Strategy:** Keep a local map for quick reference. Create a plan for evacuating patients – especially those who may need physical assistance. Know where your employees live

and all the variations of travel paths to and from those locations and your office. If you have a designated, alternative location from which to work if your building is destroyed, include those travel routes.

- **Response Checklists:** Use the suggested action plan included in Step 4 of this guide and customize it for your specific situation. Make extra copies so you can distribute them to employees if you have to prepare for a storm.
- **Receipt Folder:** During a disaster situation, you may incur numerous out-of-the-ordinary expenses and financial obligations. Make certain you have a temporary place for saving invoices, receipts, copies of orders, etc.
- **Publications:** Include a copy of this guide and any other valuable reference materials you gather.
- **Recovery Plan:** Develop a recovery strategy that contains these elements:
 - A designated person who knows your business and who will take command if necessary
 - Well-trained employees who know their roles in the plan and who will effectively support the designated team leader
 - Short-term and long-term objectives
 - Adequate financial and personnel resources
 - Effective damage assessment

Your plan should become part of your everyday operation. It must be **flexible** enough to reflect the constantly changing environment in your office and in its surroundings. Modify it whenever you add or delete inventory, change equipment or procedures, or reassign staff responsibilities. Keep valuable contact and recovery information up to date. At the very least, analyze your overall plan once each year. If you need to, schedule your review to coincide with a recurring event, such as your annual insurance renewal date.

Take it with you when you secure your office for an impending storm. Its **contents will be critical** to maintaining control during a crisis.



A Preparation Checklist and a Telephone Contact List are located in the Appendix (see Work Sheets).

Dr. Eric Lowenhaupt lost his Jupiter, Fla. orthodontic practice in Hurricane Jeanne in 2004. His story of recovery is both sobering and uplifting. For more than 20 years, he operated out of a leased space that lies east of I-95, but more than four miles from the ocean. Still, Jeanne's Category 3 winds tore most of the roof away from the building, allowing heavy rains to soak the interior. Dr. Lowenhaupt described it as, "someone turning fire hoses on all the contents of your building."

He reacted quickly – first crawling through the ceiling of his third floor office onto what remained of the roof, in order to fasten a large, blue tarp over the gaping rafters. Then he scrambled around to find boxes to remove critical patient files. His next target was the computer, which held valuable records. In retrospect, he says he should not have placed himself in such physical jeopardy, but he was "overcome by this run-in-the-burning-building response" when he saw the absolute devastation the storm caused. Having no better option, he stored the files and computer in his garage and "hoped it didn't all turn to mulch" before he could get it back into a sound building.

He was forced to evacuate the property for almost four months while contractors replaced drywall, wallpaper, cabinetry, flooring and electrical wiring.

Understand that your life will be altered. You are not going to have a nice day for a long time. Your old routine – your old life – is gone. You have to cope with the personal, psychological effects. You feel overwhelmed and have a sense of not being sure what to do next. This is normal and you will move on.

– Dr. Eric Lowenhaupt

He lost his furniture, X-ray equipment and other electrical items. Dr. Lowenhaupt says he was fortunate to have had strong community ties and good relationships with his local dental community. He operated his practice out of the offices of two local associates who shared time and space with him. He can't imagine what dental professionals would do if they found themselves in similar circumstances, but without strong support systems. His current patients were understanding and made adjustments along with him, but he estimates he lost 80 percent of potential new business.

Months after the devastation of Hurricane Jeanne, repairs are still being made on, and in, Dr. Lowenhaupt's leased

building. There are some positive sides to his experience. He is making public presentations about the importance of being prepared for disaster, taking along a Power Point presentation he designed to illustrate his message. What would he most like to share with FDA members who fall victim to a major disaster? He admits having a written plan, being better prepared and knowing how to recover would have helped.

It looks as if Dr. Lowenhaupt has given his community much more than 20 years of beautiful smiles.

BUILD SUPPORT SYSTEMS

The FDA could be one of your best friends after a catastrophe. When disaster strikes, it is not the time to discover your dues are delinquent or that you have never met key people in the organization. **Make yourself known.** Partner with other members who may share the same vulnerabilities, or those in other cities who will provide temporary storage, etc. in the event of an impending storm. Reach out, when you can, to help others. They will be there for you if you need assistance and support.

If you had to call on the local Red Cross, the Salvation Army or other volunteer group for help, would they know who you are? What do you know about them? Check the directory in the Appendix for the contact information for your county. Give them a call and **take time to get acquainted.**

Meet with local police and fire officials to discuss available services. It will be helpful if they are familiar with your building location. Make certain your address is easy to see. The numbers on your building may be damaged or blown away in a storm. If they are not painted on nearby curbing, ask if you can do it yourself.

Many local power and communications companies maintain a list of “critical service” locations. Check with your providers to see if you qualify.

One long-term element of crisis management includes **after-event public relations**. You may have to reach out to your client base, offering services that are not in the forefront of their personal recovery efforts. **Get to know at least one local reporter** you can call on to write an article that will cast a favorable light on your practice.



The Appendix includes a directory of Agencies and Organizations.

PURCHASE EMERGENCY RESPONSE ITEMS

Identify, and purchase in advance, items you’ll need if you have to operate under altered conditions.

In the aftermath of a community-wide disaster, you would likely treat only the most serious emergencies. At the very least you should have **clean water, something to numb a patient, equipment to extract a tooth, access to a pharmacy and minimal first aid supplies**. Store supplies in a watertight and secure place. Make certain key staff members know their availability and storage location. Designate who will and will not have access to them.

OTHER ITEMS TO KEEP ON HAND

- Your Disaster Manual
- A supply of heavy-duty boxes to transport files and/or supplies
- Several heavy duty tarps
- Commercial weight sheet plastic
- Sealable, plastic bags of varying sizes
- A good supply of duct tape or other water-proof tape
- Plastic or vinyl rope or clothesline
- Flashlights and a supply of fresh batteries
- A cell phone or alternate source of communication, such as a CB or HAM Radio
- Several disposable cameras, secured in a sealable plastic bag
- A basic tool kit containing a hammer, vice-grips, screwdrivers, nails, screws, work gloves, box cutter and scissors
- Bottled water



This spectacular photo was taken by NOAA Hurricane hunter aircraft, looking south from the eye of Hurricane Eloise in 1975. Photo courtesy of the National Oceanic and Atmospheric Administration/Department of Commerce, NOAA Photo Library, Flying With NOAA Collection.

FOLLOW-UP

You have created a comprehensive strategy to deal with potential disasters. Now is the time to review disaster response information with staff. **Everyone who works in the office, including temporary employees, should know where your disaster manual is kept and be familiar with its contents**. Don’t forget to cover the material with new staff members. Conduct drills and practice sessions if necessary until everyone is comfortable with their role in implementing the plan.

It’s easy to get revved up about a plan when you first develop it – and even easier to shove it in a drawer and forget about it later. Discuss it with members of your community and professional support network. Let local officials know you’ve developed a course of action to deal with emergencies. Make them aware that you take such things seriously.

Remember – your **plan should always be current** and you should modify it as you gain new insights or gather new information. If you have to use it, take the time afterward to evaluate what worked and what didn’t. Alter the procedures, if necessary, and you will be even better prepared in the future.

STEP THREE: PREPARE

Natural disasters can come without notice, but with today's high-tech communication devices and improvements in predicting weather, we often receive advance warning. When you learn bad weather is on its way, there are immediate steps you should take.

Of course, you will react differently if floodwaters are rising than if a major heat wave is moving in. You will have more time to prepare for a hurricane than a sudden tornado. In every case, your **first priority is always the health, safety and well-being** of your staff and patients – and yourself. Weigh your efforts to preserve your property and its contents against the risks of physical harm. If you are ordered to evacuate, don't hesitate!

Use your **Disaster Response Manual** and take it with you when you lock up your office. Everyone on your staff should know their assignments. **Don't worry about over-reacting.** It is better to take unnecessary precautions than to wish you had prepared. **This simple checklist will help you prioritize your activity.** It's easy to customize your plan for the type of weather expected and the time you have to get ready.

PRESERVE HISTORY

- Perform a last minute backup of computer data. If you have been performing periodic backups and have stored copies of them along with the disks necessary to rebuild your system, you will only need to copy those files with recent activity.
- Try to take your terminal with you. If you can't, unplug it and wrap it securely in heavy duty plastic.
- Secure your appointment book and take it with you.
- Cover all filing cabinets and file shelving with plastic tarps and secure with duct tape as best you can. Remember, a disaster does not necessarily release you from Health Insurance Portability and Accountability Act (HIPAA) Regulations. Do everything possible to preserve the confidentiality of patient records. You are required by law to save medical records to whatever extent possible.

- Protect X-rays, photos and dental models as much as possible. Pay particular attention to items that are susceptible to water, sunlight and temperature extremes.
- Remove irreplaceable items, such as certificates and licenses.

PROTECT EQUIPMENT

- Lock up and secure any industrial or medical device that contains radioactive material.
- Unplug all electrical equipment.
- Wrap examination chairs with heavy plastic. If you are in a flood-prone area, elevate furniture or, if possible, move it to a higher floor.
- Instruments and many stainless steel items can be sterilized and are not likely to be damaged. Bundle them in paper, secure them with tape and place them in drawers or storage cabinets.

SECURE THE LANDSCAPE

- Remove portable signs and landscape ornaments from the yard and parking areas.
- Roll up canvas awnings and secure them with vinyl rope or clothesline.
- Deactivate automatic sprinkler systems.

SECURE THE STRUCTURE

- Deploy hurricane shutters or board up your windows. Remember, taping windows only helps to keep glass from flying about – it won't prevent it from breaking or keep water out. The boards you install are only as good as the fasteners that secure them. A loosely nailed board is just one more projectile in high wind. Use screws or specially designed hurricane fasteners.
- If possible, shut off valves that control water supplies. Hopefully, you already have consulted your local natural gas supplier and know what to do with applicable control devices.
- Lock interior doors.
- Post contact information on exterior doors. If you do not have a waterproof sign, wrap it in plastic and tape or nail it in an easy-to-see location. In a hurricane, you can always use indelible marker on a board.

STEP FOUR: RESPOND

Don't forget your **commitment to safety** in the aftermath of a disaster.

It is human nature to want to survey damage as soon as possible, but avoid the urge to rush in to salvage building contents, or to take risks to further protect your property.

- Do not ignore civil authorities' warnings to stay out of restricted areas.
- Pay attention to announcements by local and governmental officials.
- Obey boil-water orders.

Even if you sustain very little damage, **getting to your location may be dangerous**. When you receive permission to enter a disaster area, wear hard-soled shoes and watch where you step. Storms dislodge nails, pieces of metal and other construction materials. Roof members, flooring, decking, steps and walls may look intact when they are structurally unsound. There may be hidden electrical hazards.

Communicate your situation as soon as possible. Your staff needs to know what is expected of them and you need to know what their personal situation

DANGER

- Do not use matches, lighters or other sources of flame after a storm.
- Damaged gas lines, leaking fuel containers and tanks may explode or ignite.
- Assume all wires on the ground – including cable TV feeds – are electrically charged.
- Debris can mask danger. Storm trash can ignite if electrical lines are severed underneath.
- Standing water and some appliances can be electrically charged after severe storms.



Even a small amount of floodwater can make travel dangerous. Less than a foot of water can sweep a car away in swift current. Damaged roadbeds, sink holes, open drains and debris can be invisible under the water's surface. This image was taken in Key West during Florida's recent Hurricane Charley. Photo courtesy of the State Archives of Florida, Florida Department of State, the Dale M. McDonald Collection.

is. Advise necessary officials of the status of your situation, even if you have escaped harm. Refer to the **Telephone Contact List** in your Disaster Manual.

Visually survey the area first. Make certain there are no electrical, chemical or other hazards on site. Report any downed power lines or gas leaks to local authorities as soon as possible. Watch out for flammable liquids that may have spilled.

Place barriers around unsafe areas.

Make temporary repairs. Fasten a tarp over holes in the roof and secure open window areas.

Assess the damage to the building's interior. Refer to your original inspections for before and after comparisons.

Examine X-ray equipment and other mechanical and electrical equipment. Do not operate anything until qualified service personnel have inspected it. Professionals should make certain all radiological shielding is still in place, but if you discover, or even suspect, an emergency, immediately contact the Florida Department of Health's 24-hour radiological emergency hotline at (407) 297-2095.

If dental records, computers and/or X-ray machines in your office have been damaged, contact the

Florida Department of Health at www.doh.state.fl.us/mqa/faq-hurricane.html.

Remove Critical Items. Secure assistance in removing or mitigating immediate hazards. If there are critical items or records that would be at risk of further damage if they remain in place, move them to a designated, safe place. Take steps to protect what is left as soon as possible.

Make an inventory of lost items and prepare a description for your insurance carrier. Take photos and prepare descriptive lists. You cannot provide too much detail. Looking at something and calling it a “total loss” is not very effective when negotiating with insurance adjusters and contractors. In the aftermath of a disaster, it is difficult to recall what you had. Use your original checklists and inventories for reference. Most importantly – you have to *prove* your losses. Note which items you think can be restored, what needs to be replaced and what will have to be discarded.

Contact your agent as soon as practicable. Have your policy number readily available. Make a reasonable guess about how long you will be unable to practice at your current location. If you will be temporarily working from another site, they will require that information. Provide the agent with any changes that might be applicable. Determine what assistance you can expect from your carrier, and when. It is not unreasonable to ask for specific dates, but you will be waiting in line with others. It may take weeks before an adjuster can be on site.

Contact your District Dental Association Representative. You should be able to find this number where you entered it in your Disaster Preparedness Plan. If not, contact numbers are listed in the Appendix and in the *Today's FDA Sourcebook*.

Work with your insurer to make repairs. If you own your building and damage is substantial, have it inspected by a certified contractor or structural engineer. If you lease your facility, work with your landlord to determine the safety of your location. Remember, **you are still responsible for the safety of those who enter your premises.** If you are in a position to hire a contractor, verify that his/her license is current and valid. A contractor must be able to provide you with written proof that he/she has workers' compen-

sation and liability insurance. Secure a copy of all insurance certificates and retain them for your records.

Make certain all applicable building permits are applied for and approved. If you occupied an older building, don't be surprised if you have to meet new building code requirements.

Make Staff Adjustments. You may be operating on a reduced schedule and may not need to maintain a full staff. Employees may be unavailable because of personal hardship. Evaluate how much and what kind of assistance you will need, and adjust accordingly. You may need substitute personnel until things return to normal. It's a good idea to know where you can find a reliable agency that will provide people with the skill levels you require. If your building is not habitable, implement your plan to practice from a designated alternative location, and keep your staff informed.

WARNING

- The U.S. Consumer Product Safety Commission warns hurricane victims that all gas control valves, electric circuit breakers, fuses, and electrical outlets – including ground fault circuit interrupters (GFIs) – **MUST be replaced** if they have been under water.
- Gas control valves on furnaces, water heaters and other gas-fueled appliances **MUST be replaced.**
- A qualified technician should **inspect** appliances, such as fans, motors, microwaves and venting systems.

Begin clean-up operations. If you and/or your staff are going to participate in clean-up efforts, exercise caution by wearing **heavy-duty gloves, eye protection, hard hats and lightweight masks**. Unless you are certain to the contrary, assume floodwaters contain sewage waste. Disinfect your clothing when you return home. Be careful not to expose anyone to physical risk when working around mold or other environmental conditions. Mold and mildew can release spores into the air, causing allergic reactions. Watch for symptoms such as:

- Watery eyes
- Runny nose
- Sneezing
- Congestion
- Fatigue

Hire a professional firm to assist you if you can, but in a widespread disaster, it may be difficult to get someone promptly. There are some things you can do.

- **Practice basic hygiene.** Wash your hands with disinfectant soap after touching debris or anything that may have come in contact with contaminated materials. If there is no running water, fill a beverage cooler (or similar container that has a spout) with clean water and transport it to the site. If you have running water, but its purity is suspect, add a tablespoon of bleach to each gallon and use it only for washing.
- If moisture is present, **open windows and doors** and use the outside air to help dry your office. Use exhaust fans and dehumidifiers if you have them. Open **drawers and cabinets**. Unwrap anything you covered with plastic.
- If water has penetrated walls, floors or ceilings, they should be opened up, cleaned, decontaminated and totally dried. It is likely they will have to be replaced, but **releasing trapped water and allowing areas to dry out will reduce mold production**.
- **Check with local authorities** about the removal of wet insulation or other building materials. Discard all non-essential paper files and paper products.
- **Remove waterlogged carpet** as soon as possible to avoid causing more damage to the floor. You may be able to save expensive



The aftermath of a major disaster can be disheartening. Hurricane Andrew left this mess. Clean-up efforts require time, energy and patience. *Photo courtesy of the State Archives of Florida, Florida Department of State, Photographic Collection.*

carpet if it can be cleaned and dried quickly, but carpet padding must be discarded.

- **Scrub floors and woodwork** within 48 hours using firm brushes and disinfectant. Wipe them down and allow them to dry thoroughly.
- **Discard upholstered furniture** if it has been exposed to water or contaminated materials. **Wood furniture may be salvageable** if you can clean and disinfect it promptly. Allow it to dry slowly. Metal surfaces must be disinfected.
- It is important to try to **prevent mold and mildew growth**. Common bleach can be effective in killing mold spores on non-porous surfaces, such as stainless steel. Wipe the item down thoroughly and dry it well. Bleach does not work as well on porous surfaces, such as wood flooring.

There are some EPA-registered products that are considered effective in killing mold and fungus on all types of solid surfaces. Check with your local cleaning products vendor or look for them at local building supply stores.

HINT

Generally, you can save paper records and files by separating them and laying them out on a flat, dry surface. If you are unable to do this within 24 hours, place them in a freezer. Cold temperatures keep mold from forming. Museums have preserved books in this manner for up to 10 years before starting the reclamation process.

HURRICANE DISASTER FUNDS FOR DENTISTS

The Florida Dental Health Foundation (FDHF) and the American Dental Association Foundation (ADAF) offer assistance to dentists whose offices have been affected or destroyed by natural disasters, including hurricanes.

Through the FDHF's Disaster Fund, the FDA stands ready to assist dentists whose offices are affected or destroyed by disasters. You do not need to be a member of organized dentistry to apply for Disaster Fund consideration.

FDHF DISASTER FUND

The FDHF's Disaster Fund provides financial assistance to needy, eligible beneficiaries who are victims of a declared disaster. This assistance is provided in order to maintain or restore the availability of dental care in affected areas. A disaster is defined as a "sudden occurrence which inflicts widespread catastrophic damage to a large geographic area and/or which generally affects a large number of individuals." Examples include, but are not limited to: tornadoes, earthquakes, floods, tidal waves, forest fires, hurricanes, civil unrest, public disturbance, acts of war and terrorism.

Any licensed, private-practicing dentist who is a full-time resident of the state of Florida, or any Florida-registered dental laboratory, may apply for financial assistance. Requests are evaluated by a Disaster Fund Committee and are decided on a case-by-case basis.

Assistance provided through the FDHF's Disaster Fund includes short-term loans and emergency grants. Loans are provided to supplement insurance coverage to assist in the restoration, repair or reconstruction of an existing practice facility or dental laboratory damaged by a disaster. Emergency grants also are available to provide funds to establish a temporary facility to provide dental care or dental-laboratory services while repairs are completed on the

applicant's primary practice location or dental laboratory.

If you have questions, or would like to speak with an FDHF staff member about your FDHF or ADAF Disaster Fund Application, contact Cheri Sutherland, FDHF executive assistant, at (800) 877-9922, Ext.119, or csutherland@floridadental.org.

OTHER SOURCES OF DISASTER RECOVERY FUNDS

Federal and state agencies respond in numerous ways to natural disasters. **Assistance programs vary by location and event.** The availability of public and private funds will be announced on television, radio and in the print media.

The **Small Business Administration (SBA)** offers low-interest **Business Physical Disaster Loans** to repair or replace real estate, machinery, equipment, inventory and supplies. Loans are secured and the applicant must demonstrate the ability to repay. You must also prove you cannot access the same loan terms anyplace else. There are statutory limits on the amount of the loan, but interest rates vary. Loan agreements include a requirement to maintain full hazard insurance for the life of the loan and borrowers may be obligated to purchase flood insurance. Applications for assistance usually are processed through the **Federal Emergency Management Agency (FEMA)**.

In a declared disaster, businesses that have suffered major losses also may qualify for **SBA Economic Injury Disaster Loans**. Amounts are limited to actual economic losses that personal resources cannot offset, or that insurance will not reimburse.

Economic Injury Disaster Loans also may be available through the Florida Department of Health.

CAUTION

Disasters can bring out the best in people – and the worst. Make sure you know with whom you are dealing. FEMA inspectors and contractors wear distinctive photo identification cards. Do not assume that someone wearing a FEMA shirt is authorized to do so. SBA employees also carry photo identification. Bona fide personnel will never ask for money or seek personal financial information, Social Security numbers or Federal Identification numbers on site.

STEP FIVE: RECOVER

Recovering from any type of disaster includes making **long-term adjustments** and taking time to recuperate from the **emotional and physical effects** associated with traumatic events. All of us deal with stress on various levels each and every day, but major storm episodes compound these challenges with new demands on our time, our patience and our health. Disaster victims sometimes perform well during the initial shock phases, but lose their energy levels after prolonged stress.

According to the Centers for Disease Control, traumatic events are “marked by a sense of horror, helplessness, serious injury, or the threat of serious injury or death.” These symptoms usually go away after a month or so, but if they last beyond three months, you should seek assistance.

Remember that **those around you are suffering, too**. Your family and employees are dealing with their own issues. They may be looking to you, as a caregiver, to provide assurance that the situation is under control, and that things eventually will return to some level of normalcy. Be honest about what has happened and

what can be expected during the recovery process. Depend on each other for support.

Substance abuse rises after a major incident. The use of over-the-counter stimulants to offset fatigue is common. Survivors also are tempted to turn to tranquilizers or alcohol as a source of artificial comfort. During difficult times, medical professionals often are asked to provide the prescriptions necessary to secure these items. You can deny these requests firmly, but understand that person’s underlying needs. Take time to offer comfort and withhold judgment.

Take care of your own physical well-being.

- Try to limit your intake of caffeine.
- Make sure you get enough rest.
- Control your diet and nutritional intake.

Disaster victims go through all of the **six stages of grief – shock or denial, depression, anger, acceptance, emotional release and hope for a better future**. Take time to nurture yourself and others. Don’t hesitate to accept help.

SUMMARY

This guide was prepared to help you design a customized **Disaster Preparedness and Recovery Manual** that – hopefully – you will never need.

If you are forced to operate under crisis conditions, we hope this publication will help ensure your business is among those that survive Florida's storm events. We encourage you to take action now to protect yourself, your family, your employees and your critically needed dental practice. Take the time to design the strategies that will be required if ever you are faced with catastrophe.

Please take a leadership role in your community and encourage others to do the same.

We all love living and working in our beautiful Sunshine State and we can learn to safely ride out the occasional weather challenges.



Photo courtesy of the National Oceanic and Atmospheric Administration/Department of Commerce, NOAA Photo Library, Historic NWS Collection of Weather Wonders.

APPENDIX

Note: Resource information is published for the convenience of the FDA membership. Inclusion on this list does not imply endorsement of any offered or advertised service or product. All PDF forms are downloadable and may be freely copied for your use.

DISASTER RELIEF DONATIONS

Donate to the FDHF Disaster Fund

[PDF or see page 38]

Volunteer Florida Foundation

401 S. Monroe Street, Tallahassee, FL 32301
800-825-3786

Donations payable to Florida Hurricane Relief Fund

HURRICANE SAFETY PRODUCTS

Coulter Hurricane Products Corp.

Shutters, screens and awnings
Hialeah Gardens, FL
800-533-4869
<http://www.coulterhurricane.com/>

Omark Safety Products

First aid supplies
515-278-5422
<http://www.omarksafety.com/>

Saratoga Trading Company

Suppliers of survival products, including radios, flashlights & purified water
Saratoga Springs, UT
800-773-5331
<http://saratogatradingcompany.com/index.html>

Savannah Sales

Architectural specialty items to withstand hurricane forces; skylights, screens, doors, plywood clips, flood barriers and other related products
Toll free: 888-640-0850
<http://www.hurricaneproducts.com/index.shtml>

SecurityWorld.com

Makers of the Hurricane Wedge – a device to secure wood panels on windows
800-669-7328
<http://www.securityworld.com/homeapt/91642.html>

Storm Guard Window

Film products
Toll free: 888-306-7998
<http://www.stormgard.com/home.html>

Storm Shield Hurricane Products

Supplies specialty screens that you can see through, but will still protect windows
Palm City, FL
Toll free: 888-393-8373
<http://www.stormshield.net/>

Therma-Tru Doors

Carries Florida Building Code approved products
800-843-7628
<http://www.thermatru.com>

INSPECTION SERVICES

(See Professional Associations to locate other certified individuals)

A+ Inspection Services

(serving Central Florida)
800-990-2776
<http://www.orlandohomeinspection.com/pages/913524/index.htm>

All Florida Home Inspection.

Don Arnold (serving Pinellas, Pasco, Hillsborough, Citrus, Hernando and Sarasota Counties)
727-367-2734
<http://www.allfloridahomeinspection.com/>

Certified Building Inspectors Inc.

Maitland, FL 32751
Toll free: 888-628 4405
info@orlandohomeinspections.com

5th Avenue Building Inspectors

(serving the southeastern quadrant of Florida, from Vero Beach to Homestead)
800-273-5601
<http://www.5th-ave-inspect.com/>

National Property Inspections Inc.

Bradenton, FL
941-358-6320
<http://www.npiweb.com/gjohnson/>

Southern Building Inspectors

Ponte Vedra Beach, FL
904-543-9245

Straight Inspection Service

Specializes in hurricane resistant construction principles, performs inspections for the Red Cross and H.U.D.

Anna Maria, FL

941-778-2385

<http://flinspector.com/compro.html>

Suncoast Inspections

(serving the Tampa Bay area)

Also offers video services

<http://www.suncoastinspections.com/>

PROFESSIONAL ASSOCIATIONS**American Shutter Systems Association Inc.**

West Palm Beach, FL

800-432-2204

<http://www.amshutter.org>

American Society of Home Inspectors

800-743-2744

<http://www.ashi.org/>

Building Officials Association of Florida

407-265-9009

<http://www.boaf.net/>

Florida Association of the American Institute of Architects (AIA Florida)

850.222.7590

<http://www.aiafla.org/>

Florida Association of Home Inspectors

800-544-3224

<http://www.fabi.org/>

FLORIDA DENTAL ASSOCIATION

Florida State Headquarters, Tallahassee

800-877-9922

E-mail: fda@floridadental.org

**FLORIDA DENTAL ASSOCIATION
DISTRICT CONTACTS****Atlantic Coast District, Lake Worth**

Michael Dvorak, Executive Director

800-329-4834

E-mail: acdda@aol.com

Central Florida District, Orlando

Linda Lowell, Executive Director

800-449-3481

E-mail: lbcdda@aol.com

Northeast District, Jacksonville

Sally Ott, Executive Director

904-355-4232

E-mail: nedda15@bellsouth.net

Northwest District, Tallahassee

Frances Dover, Executive Director

850-539-4030

E-mail: fadover@aol.com

South Florida District, Coral Gables

Rosalie A. Small, Executive Director

800-344-5860

rosiesmall@aol.com

West Coast District, Tampa

Lissette Adkins, Executive Director

800-260-5277

lissette@wcdental.org

National Association of Home Inspectors

(Prefer no phone calls)

<http://www.nachi.org/>

International Association of Mold Management

800-805-4266

<http://www.moldassociation.org/>

Housing Inspection Foundation

320-763-6350

<http://www.iami.org/hif.cfm>

Florida Association of Building Inspectors Inc.

Orlando, FL

800-544-3224

info@fabi.org

PUBLIC AGENCIES/ORGANIZATIONS**American Radio Relay League Inc (ARRL)**

Associated with the National Association of Amateur Radio Operators.

Based in Newington, VT

860-594-0200

<http://www.arrl.org/FandES/field/pubservice.html>

AMERICAN RED CROSS

<http://www.redcross.org/index.html>

Alachua County Chapter (Gainesville)

352-376-4669

<http://alachua.redcross.org/>

Broward County Chapter (Fort Lauderdale)

954-797-3800

<http://www.arbcc.org/>

Capital Area Chapter (Tallahassee)

850-878-6080

<http://www.tallytown.com/redcross/ds/>

Central Panhandle Chapter (Panama City)

850-763-6587

<http://centralpanhandle.redcross.org/>

Central Florida Chapter (Orlando)

407-894-4141

<http://centralflorida.redcross.org/home.php>

Charlotte County Chapter (Port Charlotte)

941-629-4345

<http://www.sunline.net/redcross/>

Coast to Coast Chapter (Daytona)

386-226-1400

<http://www.daytonaredcross.org/>

Collier County Chapter (Naples)

239-596-6868

<http://www.colliercountyredcross.org/>

Greater Miami and the Keys Chapter (Miami)

305-644-1200

<http://www.miamiredcross.org/>

Lee County Chapter (Fort Meyers)

239-278-3401

<http://www.arclcc.org/contactus.htm>

Manatee County Chapter (Bradenton)

941-792-8686

<http://www.manateeredcross.org/>

Martin County Chapter (Stuart)

772-287-2002

<http://martincountyfl.redcross.org/>

North Treasure Coast Chapter (Vero Beach)

772-562-2549

<http://chapters.redcross.org/fl/northtreasurecoast/>

Northeast Florida Chapter (Jacksonville)

904-358-8091

<http://www.nefloridaredcross.org/>

Northwest Florida Chapter (Pensacola)

850-432-7601

<http://northwestflorida.redcross.org/>

Palm Beach County Chapter (West Palm Beach)

561-650-9145

<http://www.redcross-pbc.org/>

Polk County Chapter (Winter Haven)

863-294-5941

<http://polkcountyfl.redcross.org/>

Southwest Florida Chapter (Sarasota)

941-377-7830

<http://southwestflorida.redcross.org/>

Space Coast Chapter (Melbourne)

321-723-7141

<http://brevardcounty.redcross.org/index.htm>

Tampa Bay Chapter (Tampa Bay)

877-741-1444

<http://www.redcrossstbc.org/>

Centers for Disease Control and Prevention (CDC)

Specific health information and guidance regarding CBR agents

800-311-3435

<http://www.cdc.gov/>

Federal Emergency Management Agency (FEMA)

Helpline: 800-525-0321

<http://www.fema.gov/>

Florida Department of Health

www.doh.state.fl.us/mqa/faq-hurricane.html

Florida Department of Health – County Health Departments

www.doh.state.fl.us

Florida Department of Insurance

Consumer Helpline: 800-342-2762

Florida Division of Emergency Management

<http://www.floridadisaster.org>

National Institute for Occupational Safety and Health (NIOSH)

Health and safety guidance, publications and training information

<http://www.cdc.gov/NIOSH/homepage.HTML>

National Flood Insurance Program

800-427-4661

Salvation Army (Southern Division)

404-728-1300

<http://www.uss.salvationarmy.org>**PUBLICATIONS*****After The Flood – Safety Tips for Business Owners***

Published by The Hartford Loss Control Department, TIPS Series S 970.026, 1999

Available online at http://lb.thehartford.com/review_capabilities/library.asp**American Red Cross**

Provides community disaster education materials; produced to help people prepare for, respond to and cope with emergencies. (See Public Agencies and Organizations for local contact information.)

Building Air Quality: A Guide for Building Owners and Facility ManagersPublished by the U.S. Environmental Protection Agency (EPA). Provides procedures and checklists for developing a building profile and performing preventive maintenance in commercial buildings
<http://www.epa.gov/iaq/largebldgs/baqtoc.html>***Chemical, Biological, Radiological Incident Handbook***Unclassified document, published by the Central Intelligence Agency (CIA), describing potential CBR events, recognizing potential CBR events, differences between agents, common symptoms and information for making preliminary assessments when a CBR release is suspected
http://www.cia.gov/cia/publications/cbr_handbook/cbrbook.htm***Family Preparedness Guide***(State of Florida) Available online in PDF format at:
<http://www.floridadisaster.org/>**Federal Emergency Management Agency
Special Library**<http://www.fema.gov/library/prepandprev.shtm>**Institute for Business and Home Safety**

Offers numerous downloadable and hard-copy publications with helpful information about storm-resistant construction

Tampa, FL 813-286-3400

<http://www.ibhs.org/publications/>***One-Stop Hurricane Resource Guide*** (Third edition)

Available from the Florida Division of Emergency Management. Produced in partnership with The Federal Alliance for Safe Homes – FLASH Inc.

Toll free: 877-352-3222

Open For Business – Disaster Recovery Folder

Published by the Institute for Business and Home Safety. Contains planning advice and holds important papers

For a free, single copy, contact IBHS at 866-657-4247 or e-mail info@ibhs.org***What Should You Do If A Hurricane Threatens Your Community?***

A simple brochure/guide to help you make the decision whether to ride out a storm, or evacuate – along with important tips about what to do in either case. Available from the Florida Division of Emergency Management

Toll free: 877-352-3222

RECOVERY AND MENTAL HEALTH ASSISTANCE**American Psychiatric Association**

Offers information of public interest and a directory of service providers

703-907-7300

<http://www.psych.org/>**American Psychological Association.**Comprehensive resources on coping with trauma
800-374-2721<http://helping.apa.org/daily/traumaticstress.htm>**National Center for Post-traumatic Stress Disorder (PTSD)**

Offers services that help children deal with disaster; specializes in services for military veterans

802-296-6300

<http://www.ncptsd.org/disaster.html>**National Institutes of Mental Health.**

Offers information on post-traumatic stress and anxiety disorders

866-615-6464

<http://www.nimh.nih.gov/>

Project COPE

A national clearinghouse for resources needed in the aftermath of a major disaster sponsored by the Westchester Institute for Human Development of the Westchester Medical Center in Valhalla, N.Y. They place a special emphasis on special-needs populations, such as children and people with disabilities, but they also offer coping guides for parents, educators and mental health professionals.
914-493-5202
<http://www.nymc.edu/wihd/projectcope/pc/>

RESTORATION SERVICES

AA Trauma Cleaning Service Inc.

Mold remediation & restoration services
Margate, FL
954-973-9502

AdvantaClean

Mold remediation & restoration
Orlando, FL
407-839-0088

Atlantic Environmental

Mold remediation, restoration services & environmental remediation
Jacksonville, FL
904-645-5288

Disaster Services Inc. (DSI)

Specializing in document reclamation & other commercial recovery efforts; serves a wide area of the state with mobile equipment.
Orlando, FL
407-351-7750
<http://www.disasterservices.com/documentrestoration.htm>

Disaster Restoration Services

Mold remediation
Weston, FL
954-384-4446
<http://www.gotmold.com>

Envirogenix

Restoration & remediation services
Fort Lauderdale, FL
954-315-3861

MicrOscope Inc.,

Mold remediation
Fort Myers, FL
239-728-6653
<http://www.moldbegone.net/about.html>

Service Magic Home Improvement

A national clearing house registry of service providers, including disaster recovery
<http://www.servicemagic.com/>

Super Restoration

Water restoration & mold mitigation
Miami, FL
Toll free: 866-437-4228
<http://www.superrestoration.com/>

Wall To Wall Services

Tampa, FL
813-935-7743

WEATHER INFORMATION – ONLINE

Accu Weather

<http://home.accuweather.com/adcbn/public/index.asp?partner=accuweather>

Intellicast.com

Weather for active lives
<http://www.intellicast.com/>

National Oceanic and Atmospheric Administration – National Weather Service (NOAA)

<http://www.noaa.gov/>

The Weather Channel

<http://weather.com>

Weather Underground

<http://www.wunderground.com/>

Yahoo Weather

<http://weather.yahoo.com/>

WEATHER RADIOS

WeatherRadios.com

Online source of weather radios – multiple manufacturers
<http://weatherradios.com/store.htm>

Midland, K.C., MO

Online source for Midland, NOAA weather radios
816-241-8500
<http://www.midlandradio.com/>

EARNINGS LOSS WORK SHEET

Should I purchase Business Interruption Insurance?

This simple worksheet will help you determine how many days you could afford to be shut down in the event of a disaster. It is provided for your personal use and will not satisfy the documentation requirements of your insurance carrier.

STEP 1 – EXPENSES (A)

Enter your average monthly "space" expenses

Building or space rental, or mortgage	_____
Utilities	_____
Power	_____
Water	_____
Sewer and waste collection	_____
Telephone and Internet costs	_____
Building maintenance and/or cleaning services	_____
Property Insurance	_____

Enter your average monthly in-house operating expenses

Staff payroll (include benefit load & taxes)	_____
Owner's salary or draw	_____
Other insurance (workers' comp., liability, etc.)	_____
Outside services (C.P.A., legal & collection exp., etc.)	_____
Equipment rental	_____
Debt service (equipment payments, vehicles, etc.)	_____
Materials and supplies (office & medical)	_____

TOTAL (A) = _____

This should reflect your average monthly operating cost

STEP 2 – INCOME (B)

Enter average monthly billing _____

Subtract average, monthly collection loss _____

Add other, average monthly income _____

TOTAL (B) = _____

This should reflect your average monthly revenue

STEP 3 – ASSESSMENT

Enter average monthly income (B) _____

Subtract average monthly expenses (A) _____

NET (B – A) = _____

Divide by 30 to determine AVERAGE = _____

This should reflect the average, daily earnings of your practice

GENERATOR COST WORKSHEET

Should I purchase a backup generator?

Use this simple worksheet to determine how many days you could afford to be without power in the event of a disaster.

STEP 1 – EARNINGS LOSS

Enter your average, daily earnings from the calculation worksheet you used to determine if you should purchase Business Interruption Insurance.

STEP 2 – ACQUISITION COST

Enter the estimated cost of a backup generator sufficient to meet your needs.

STEP 3 – SAVINGS

Divide the generator acquisition cost in Step 2 by the average, daily earnings loss in Step 1 and enter the results here.

STEP 4 – RESULTS

How many days can you go without power before the generator pays for itself?

REMEMBER

Even if you have Business Interruption Insurance, all policies exclude the first three-five business days before lost income is calculated.

INSPECTION GUIDE

Use this simple guide to conduct a physical inspection of your property. Add other observations you consider important. Note any deficiencies that may require correction. Discuss these items with your contractor or leaseholder and take appropriate action. Items relating to precautions you might take against chemical, biological and radiological events are not necessarily included on this form. Sources to obtain information about CBRs are located in the Appendix.

If possible, create a video or photographic record of the inspection. Date the form and retain one copy at the office and another off site.

EXTERIOR

Roof

Are shingles, roof tiles or other coverings securely fastened?

- Yes
 No

Action required _____

Is there evidence of sagging or a misshaped roofline?

- Yes
 No

Action required _____

Is there evidence of water "ponding" anywhere on the roof surface?

- Yes
 No

Action required _____

Are outdoor air intakes and all vents free from blockage? (leaves, pine needles, nests, vegetation)

- Yes
 No

Action required _____

Are the undersides, support framing and soffits in good repair?

- Yes
 No

Action required _____

Do roof downspouts and/or scuppers drain water away from the building's foundation?

- Yes
 No

Action required _____

Walls

Is all siding material secure and in good condition?

- Yes
 No

Action required _____

Is there evidence of cracking or structural instability on walls or around the foundation?

- Yes
 No

Action required _____

Is the paint cracked or peeling?

- Yes
- No

Action required _____

Windows and Doors

Do all windows and doors lock securely?

- Yes
- No

Action required _____

Is the caulking around windows in good condition?

- Yes
- No

Action required _____

Have doors and windows been weather-stripped to prevent excessive air flow?

- Yes
- No

Action required _____

If windows open, do they function smoothly?

- Yes
- No

Action required _____

Signs and Parking Areas

Is your street address clearly marked in at least two places? Are numbers securely fastened?

- Yes
- No

Action required _____

Are you using signs that could be easily torn away if winds exceed 40 mph?

- Yes
- No

Action required _____

Grounds / Parking Areas

Have all dead branches and overhanging limbs been trimmed from trees and bushes?

- Yes
- No

Action required _____

Are parking surfaces in good condition – without potholes or areas that would hold standing water?

- Yes
- No

Action required _____

Do you have outside furniture or yard ornaments that would have to be removed in the event of an impending storm? Do you know where you will store them?

- Yes
- No

Action required _____

Are fences in good repair and firmly affixed to the ground?

- Yes
- No

Action required _____

Are porches and decks in good repair, with all features firmly attached?

- Yes
- No

Action required _____

INTERIOR

Is there any evidence of water leaks on ceiling areas, or around doors or windows?

- Yes
- No

Action required _____

Are interior door locks in working condition? Do you have keys for all of them that are kept in a secure location?

- Yes
- No

Action required _____

Are all switches and electrical outlets working and secure?

- Yes
- No

Action required _____

Have you installed a backup generator and have you stored enough fuel to operate it for at least three days?

- Yes
- No

Action required _____

CONTENTS

Have you developed a building evacuation route plan? Is it clearly posted? Are all employees familiar with it?

- Yes
- No

Action required _____

Are all pharmaceutical products, oxygen and nitrous oxide tanks stored and secured properly?

- Yes
- No

Action required _____

Are other, potentially hazardous products (cleaning fluids, X-ray chemicals, etc.) securely stored?

- Yes
- No

Action required _____

Have you installed surge protectors and/or backup power to computers and essential equipment?

- Yes
- No

Action required _____

Date Inspection Conducted _____

By _____

PREPARATION CHECKLIST

- Preserve History
 - _____ Perform a last minute backup of computer data.
 - _____ If you cannot remove your computer, unplug it and wrap it securely in heavy duty plastic.
 - _____ Secure your appointment book and take it with you.
 - _____ Cover all filing cabinets and file shelving with plastic tarps and secure with duct tape as best you can.
 - _____ Protect X-rays, photos and dental molds as much as possible. Pay particular attention to those items that are susceptible to water, sunlight and temperature extremes.
 - _____ Remove irreplaceable mementos such as certificates and licenses.

- Protect Equipment
 - _____ Lock up and secure any industrial or medical device that contains radioactive material.
 - _____ Disconnect all electrical equipment – including medical equipment, appliances, lamps and office machines. Secure them in plastic as best you can.
 - _____ Wrap examination chairs with heavy plastic. If you are in a flood-prone area, elevate furniture or – if possible – move pieces to a higher floor.
 - _____ Bundle instruments in paper, secure them with tape and place them in drawers or storage cabinets.

- Secure the Landscape
 - _____ Remove portable signs and landscape ornaments from the yard and parking areas.
 - _____ Roll up canvas awnings and secure them with vinyl rope or clothesline.
 - _____ Deactivate automatic sprinkler systems.

- Secure Structure
 - _____ Deploy hurricane shutters or board up your windows.
 - _____ If possible, cut off valves that control water supplies. Consult your local natural gas supplier for directions on what to do with applicable control devices.
 - _____ Lock interior doors.
 - _____ Post contact information on exterior doors. If you do not have a waterproof sign, wrap it in plastic and tape or nail it in an easy-to-see location.

DON'T FORGET

TAKE YOUR DISASTER PREPAREDNESS GUIDE AND APPOINTMENT BOOK WITH YOU.

TELEPHONE CONTACT LIST

Emergency Services
Fire Department (non-emergency)
 Contact Person _____
 Number _____
Ambulance _____
Police (non-emergency)
 Contact Person _____
 Number _____
Animal Control _____
County Health Department
 Contact Person _____
 Number _____
State Health Department
 Contact Person _____
 Number _____
Emergency Management Center (County)
 Contact Person _____
 Number _____
Emergency Management (State of Florida)
 Contact Person _____
 Number _____
Hospital
 Name _____
 Number _____
Walk-in Clinic
 Name _____
 Number _____
 Location _____
Attorney or Legal Advisor
 Name _____
 Number _____
Bank
 Contact Name _____
 Number _____
 Location of nearest ATM _____
Building Contractor
 Name _____
 Number _____
Carpenter
 Name _____
 Number _____
Cell Phone Service Provider
 Company _____
 Number _____
Computer Repair (Hardware)
 Company _____
 Number _____
Computer, Technical Assistance (Software)
 Company _____
 Number _____

Electrician
 Company _____
 Name _____
Florida Dental Association District Representative
 Name _____
 Number _____
 E-mail _____
Freezer Rental
 Company _____
 Number _____
Gas Company
 Provider _____
 Number _____
Generator Rental
 Company _____
 Number _____
Insurance Agent (Fire and Hazard)
 Name _____
 Office Number _____
 Claims Office _____
 Policy # _____
Insurance Agent (Business Interruption)
 Name _____
 Number _____
 Policy # _____
Insurance Agent (Workers' Compensation)
 Name _____
 Number _____
 Policy # _____
Insurance Agent (Other)
 Name _____
 Number _____
 Policy # _____
Internet Provider
 Company _____
 Number _____
Janitorial Service
 Company _____
 Number _____
Locksmith
 Name _____
 Number _____
Medical Equipment
 Company _____
 Number _____
Medical Supplies
 Company _____
 Number _____
Office Supplies
 Source _____
 Number _____



FDHF Disaster Fund Donor Form

Yes, I would like to support the Florida Dental Health Foundation's Disaster Fund through a tax-deductible contribution:

- \$50
- \$100
- \$ _____ (other)

Name _____

Address _____

City _____ State _____ ZIP Code _____

Please return this form with your contribution to: FDHF Disaster Fund
1111 E. Tennessee St.
Tallahassee, FL 32308

Method of payment:

- Enclosed is my check.
Please make check payable to Florida Dental Health Foundation.
- Please charge the above amount to my credit card.
Credit-card payments may be faxed
 - MasterCard Visa

Credit-card number: _____

Expiration date: _____

Signature: _____

The Florida Dental Health Foundation is a non-profit, charitable organization approved by the Internal Revenue Service as a 501(c)(3) tax-exempt corporation.

The FDHF is registered with the Florida Department of Agriculture and Consumer Affairs(#SC-02435). The FDHF receives 100 percent of charitable contributions. No portion of contributions are retained by a professional solicitor.

A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL-FREE, (800) 435-7352, WITHIN THE STATE. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE.



FDHF Disaster Fund Guidelines

PURPOSE

The purpose of the Florida Dental Health Foundation's Disaster Fund is to provide financial assistance to needy eligible beneficiaries, as defined in these guidelines, who are victims of a natural or man-made disaster. This assistance is provided to the eligible applicant in order to maintain or restore the availability of dental care in affected areas. A natural or man-made disaster is defined as a "sudden occurrence which inflicts widespread catastrophic damage to a large geographic area and/or which generally affects a large number of individuals." Examples include, but are not limited to: tornadoes, earthquakes, floods, tidal waves, forest fires and hurricanes.

ELIGIBLE BENEFICIARIES

Any licensed private practicing dentist who is a full-time resident of the state of Florida or any Florida registered dental laboratory may apply to the Florida Dental Health Foundation for financial assistance.

TYPES OF ASSISTANCE

Assistance provided through the Florida Dental Health Foundation's Disaster Fund includes short-term loans and emergency grants.

Loans are provided to supplement insurance coverages to assist in the restoration, repair or reconstruction of an existing practice facility or dental laboratory damaged by a natural disaster, as defined in "Purposes" in these guidelines. Emergency grants also are available to provide funds to establish a temporary facility to provide dental care or dental laboratory services during the time that repairs are being completed on the applicant's primary practice location or dental laboratory.

CIRCUMSTANCES DETERMINING ELIGIBILITY

Criteria for determining eligibility of disaster loans and grants are listed below. Any application for a disaster loan or emergency grant which does not meet **ALL** of these criteria will be denied.

a. As a result of the natural or man-made disaster, the applicant must show that he or she suffered property damages to the dental practice facility or registered dental laboratory owned by the applicant, or the den-

tal equipment and supplies therein. Replacement of lost income from practice interruption is not an eligible reason for assistance.

b. A "natural or man-made disaster," as defined in "Purposes" in these guidelines, must be declared by a governmental agency, or be determined by the Florida Dental Health Foundation's Disaster Fund Committee to have occurred in the area of the state of Florida in which the applicant seeking assistance operates his or her dental facility or dental laboratory.

c. The applicant must show that his or her property damages have caused a serious financial hardship and that other sources of adequate funding are not available. Eligibility is determined on a case-by-case basis after evaluating the application form.

d. The request for a loan or grant must be submitted within 12 months of the time of the disaster.

EVALUATION OF APPLICATION AND PROCESSING PROCEDURES

a. Application forms must be completed in entirety, signed and dated by applicant requesting assistance. The applicant may obtain an application form online, in the *FDA Sourcebook*, or from the FDHF office.

b. An application for assistance from the Florida Dental Health Foundation's disaster fund will be reviewed by the Disaster Fund Committee. The applicant requesting assistance will be notified of the decision of the committee as to the approval or denial of the request within 14 days.

BASIS FOR ASSISTANCE

The primary reason for the Foundation's Disaster Fund is to help dentists continue to provide dental care to communities affected by natural or man-made disasters. Therefore, the applicant shall certify that he or she intends to practice in the disaster affected area for at least the original term of the loan or emergency grant. This certification is part of the application form. If an individual leaves a disaster stricken area to practice elsewhere during the original term of the loan or emergency grant, the Florida Dental Health Foundation shall have the right to immediately call the loan due and seek repayment of the emergency grant.



FLORIDA DENTAL HEALTH FOUNDATION Disaster Fund Application

PERSONAL INFORMATION

Name of Applicant _____ E-mail _____
Address _____ City, State, ZIP _____
County _____ Home Phone (_____) _____ Office Phone(_____) _____
FL Dental License # _____ Dental Laboratory Registration # _____

NATURE OF DISASTER: Provide a description of the nature of the disaster. Attach supporting articles, documents, pictures, etc. Be specific as to time, day, and date in completing this section (*continue on back of this form, if necessary*).

AMOUNT OF DAMAGE: Structure \$ _____ Equipment \$ _____ Supplies \$ _____
Total Damage \$ _____ Insurance Coverage \$ _____ Net Loss After Insurance \$ _____

INSURANCE COMPANY INFORMATION

Name of Company _____ Phone Number (_____) _____
Address _____ City, State, ZIP _____
Agent's Name _____ Policy Number _____
Coverage Amount \$ _____ Deductible Amount \$ _____

FINANCIAL INFORMATION

Name of Bank _____ Phone Number (_____) _____
Address _____ City, State, ZIP _____
Checking Account # _____ Savings Account _____
Money Market Account # _____ Total Assets \$ _____

Have you applied for a loan from a financial institution to help you in your time of emergency? Yes No
Has the loan been denied? Yes No

IDENTIFICATION OF OTHER SOURCES OF AID

Small Business Administration \$ _____ Family and relatives \$ _____
Other sources \$ _____ Other \$ _____ Other \$ _____

I hereby certify that the information contained in this document is true and complete. I hereby authorize any corporation, firm, agency or institution to furnish to the Florida Dental Health Foundation Inc. any and all information in its possession relative to my assets, deposits, dealings or business of any kind whatsoever.

SIGNATURE OF APPLICANT

DATE

RETURN APPLICATION TO: Florida Dental Health Foundation ■ Disaster Relief Assistance
1111 E. Tennessee St. ■ Tallahassee, FL 32308 ■ 800-877-9922

FDHF Disaster Fund Certification by the Applicant



I certify that I suffered a natural or man-made disaster to my dental practice/dental laboratory, equipment or supplies as detailed herein on this application.

I intend to continue to practice in this community after this disaster for the term of the disaster loan or emergency grant, if granted. If the loan or grant is granted and I stop practicing in this community, I understand that the outstanding balance of the loan will become due and immediately payable to the Florida Dental Health Foundation, Inc. at the sole discretion of its Disaster Committee. If I was awarded an emergency grant and I fail to complete practice in the community where the disaster took place during the specific time of the grant period as established by myself and the FDHF's Disaster Committee, I agree to repay the entire amount of the grant at the sole discretion of the Disaster Committee.

I certify that the information contained in this application is true and complete. I understand that a fraudulent representation or omission of any information requested in this application is grounds for immediate refusal to grant any loans under this program, and is grounds for the Florida Dental Health Foundation Disaster Committee, in its sole discretion, to declare any outstanding balance due and immediately payable to the Florida Dental Health Foundation, Inc.

I understand that the provision of such a loan or grant is neither a right nor entitlement and that the Disaster Committee of the Florida Dental Health Foundation will have the sole discretion in determining whether I qualify for financial assistance under this fund.

I understand that I am obligated to provide the Florida Dental Health Foundation, Inc. within six months of the granting of a disaster loan or emergency grant, copies of receipts, invoices or bills of sale verifying the use of the loan or grant proceeds for repair or reconstruction of the practice facility/dental laboratory, or for the repair or replacement of damaged equipment or supplies.

I also understand that if I am granted a disaster loan, that I will repay the loan principle and a Five (5) percent administrative fee to the Florida Dental Health Foundation, Inc., on a payment plan approved by the sole discretion of the Disaster Committee.

I hereby request consideration for a: 1) disaster assistance loan in the amount of \$_____ for a term of _____ years; 2) emergency grant in the amount of \$_____. I agree to abide by the rules set forth in the Florida Dental Health Foundation Inc. Disaster Fund.

Signed _____ Date _____
SIGNATURE OF APPLICANT

Witnesses to Applicant's Natural or Man-made Disaster: _____
NAME OF WITNESS

NAME OF WITNESS

Notary Public:

FDA Five Step Guide For Disaster Preparedness & Recovery



American Dental Association
www.ada.org

211 East Chicago Avenue
Chicago, Illinois 60611-2678
312-440-2699

Department of
Membership
Information

**Request for
Waiver of
Membership Dues**

A full or partial waiver is available to a member in good standing whose circumstances have resulted in a severe financial hardship, including temporary or permanent disability, catastrophe, parental leave or medical illness.

1. All applicants should complete Section 1.
2. Applicants requesting a waiver due to **Financial Hardship** should complete Section 2, including the request for financial information.
3. Applicants requesting a waiver because of **Disability** should have Section 3 completed by their physician.
4. Section 4 is to be completed by the constituent and component societies.

Please forward this completed form to your local society for their review and approval. They will send it to your state society for their review and the state society will forward it to the ADA.

SECTION 1: To Be Completed by the Member Dentist

Name _____ ADA ID # _____

Address _____ City/State/Zip _____

_____ Office Phone (_____) _____

Address type: Home Office Phone (_____) _____

E-mail address _____ Fax (_____) _____

I am requesting a waiver of dues from the American Dental Association and my constituent and component societies for the _____ membership year.

SECTION 2: FINANCIAL HARDSHIP WAIVER (To be completed by the Member Dentist)

Please describe your financial situation and the reasons for your request for a financial dues waiver. Your local or state dental societies may request additional information in order to review your request.

Member's Signature _____ Date _____

SECTION 3: DISABILITY WAIVER A Medical Certificate must be submitted to the constituent and component societies and is to be completed by your physician if your request is because of total disability, which prevents you from engaging in the duties of the dental profession. Attach documentation verifying your disability, which indicates whether it is permanent or temporary.

Federal Dental Service Dentists A dentist who has been totally disabled during active military duty and who is unable to practice dentistry within the definition of the *Bylaws* and who was a member in good standing at the time total disability was incurred may be entitled to remission of dues upon certification by an agency of the federal government that the dentist is permanently and totally disabled in accordance with the standard schedule of rating disabilities in current use by the Department of Veterans Affairs.

Please describe the nature of disability _____

Approximate date incurred _____

Please check one: The disability is: **Permanent** **Temporary or unknown**

Attending Physician's Signature _____

Attending Physician's Name and Address _____



American Dental Association
www.ada.org

Continued from front

SECTION 4: TO BE COMPLETED BY THE CONSTITUENT AND COMPONENT SOCIETIES

Constituent Society Name

Component Society Name

Please check one: The request is due to: **Financial Hardship** **Disability** **Temporarily Activated to Federal Service**
(Not to exceed a period of three years)

Please check one: The waiver is granted: For 1 year due to financial hardship or temporary disability
 On a permanent basis due to permanent disability
 Approved for _____ membership year

Please check one: The above member has been approved for a: **Full Waiver (100%)**
 Partial Waiver (75%)
 Partial Waiver (50%)

Constituent Society Executive Director

Date

Component Society Executive Director

Date

ADA Use Only

Member Year _____

Current Status _____

Approved _____

Letter Sent _____

Rev. 11/04



ADDENDUM TO WAIVER APPLICATION

This addendum must be completed and attached to the *American Dental Association Request for Waiver of Membership Dues* form **when requesting a dues waiver for financial hardship**. Please complete the following work sheet in full so we may expedite your request.

This application is for a one-year waiver. Dues waiver categories are granted for physical disability or financial hardship. If you have questions or desire personal contact to discuss this request in confidence, please call Joyce Brewer, FDA Membership Coordinator at (800) 877-9922 for referral to the appropriate member of your component dental society.

Name _____ Address _____
 City _____ State _____ ZIP Code _____ Phone _____

I. CURRENT MEMBERSHIP STATUS

- Active Active Life Retired Graduate Student Other

II. YOU ARE REQUESTING A WAIVER PRIMARILY BECAUSE OF:

- Disability: Temporary Permanent
 Financial difficulties relating to your practice
 Financial difficulties related to a natural disaster or accident
 Financial (Personal)

DISABILITY

- Are you still able to practice dentistry? Yes No
 If unable to practice, are you able to work in another field outside dentistry? Yes No
 If able to work in another field, are you currently planning to work in the near future? Yes No
 Have you contacted the FDA or ADA about a Relief Fund application? Yes No

FINANCIAL DIFFICULTLIES RELATING TO YOUR PRACTICE

- Type of practice: Solo Partnership Associate
 Number of years in practice _____
 Does your practice have an established patient base? Yes No
 If this is an existing practice with a patient base, what is the primary cause for the change in financial circumstances?
 Local economy
 Changes in community/population or demographic change
 Personal health or inability to take care of practice
 Other _____

FINANCIAL DIFFICULTIES RELATED TO A NATURAL DISASTER OR ACCIDENT

- Does insurance cover the cost of repairing the majority of the damage? Yes No
 Despite insurance coverage, will it take more than one month to get the practice back to full operation? Yes No
 Anticipated start date _____

FINANCIAL DIFFICULTIES RELATED TO PARENTAL LEAVE

- Yes No

Length of time away from work _____

FDA ADDENDUM TO WAIVER APPLICATION (PAGE 2)

III. PERSONAL INCOME AND EXPENSE INFORMATION

Income	\$ _____
Net income (less overhead expenses) from practice	\$ _____
Net income from other employment	\$ _____
Other Income (insurance, Social Security, etc.)	\$ _____
 Expenses	
Home payments or rent	\$ _____
Educational Loans	\$ _____
Healthcare/medical Expenses	\$ _____
Other	\$ _____
Net Income (Loss)	\$ _____

Signature _____ Date _____

Please feel free to include additional information you feel pertinent to this request.



American Dental Association Foundation

RULES FOR DISASTER ASSISTANCE LOAN PROGRAM

1. **Purpose.** The purpose of disaster assistance loans is to provide financial assistance to needy eligible beneficiaries, as defined in this section, who are victims of a disaster, in order to maintain or restore the availability of dental care in affected areas. A disaster is defined as a "sudden occurrence which inflicts widespread catastrophic damage to a large geographic area and/or which generally affects a large number of individuals." Disasters can be both natural and caused by human conduct. Examples include, but are not necessarily limited to: civil disorders (excluding acts of war), explosions, fires, tornadoes, earthquakes, floods, tidal waves, forest fires and hurricanes.
2. **Eligible Beneficiaries.** Any dentist who is a victim of a disaster may apply to the ADA Foundation for a loan to assist in restoring, repairing or reconstructing a practice facility damaged by a disaster. All requests for disaster assistance loans shall be made within 12 months of the occurrence of the disaster.
3. **Circumstances Determining Eligibility for Loans.** Criteria for determining eligibility of disaster loans are listed below. Any application for a disaster loan which does not meet all of these criteria will be denied.
 - a. As a result of the disaster, the applicant must show that he or she suffered unreimbursed property damages to the dental practice facility owned by the applicant, or the dental equipment and supplies therein. Replacement of lost income from practice interruption is not an eligible reason for assistance.
 - b. A "disaster" must be declared by a governmental agency or be determined by the Board in accordance with the definition provided in paragraph 1 above.
 - c. The applicant must show that his or her uninsured property damages have caused a serious financial hardship and that other sources of adequate funding are not available.

Eligibility is determined on a case-by-case basis after evaluating the applicant's overall financial statement, the net loss after any insurance coverage and the applicant's availability of personal assets to cover the uninsured loss. The liquidity of the applicant's financial resources shall be considered in determining the extent of the financial hardship. In addition, the following requirements will be considered:

- 1) The applicant shall submit at least one (1) written refusal by a banking institution to grant a loan at prevailing commercial terms for the total amount of requested funds.
- 2) The total net worth of applicant and spouse, after taking into account the loss caused by the disaster, shall be depleted by at least 25 percent. Applicants whose net worth has not been depleted by at least 25 percent shall not be eligible for loan monies in the event of a disaster. Satisfaction of the 25 percent depletion test alone does not qualify the applicant for assistance. It is merely the first threshold to be met in the consideration of financial hardship. If the 25 percent test is not met, no loan will be provided. If that test is met, assistance will be provided only after consideration of the other financial factors, including total net worth, the availability of personal assets to cover the uninsured loss, and the inability to obtain a commercial loan for the requested amount.

Rules for ADAF Disaster Assistance Program (page 2)**4. Evaluation of Application and Procedures for Processing.**

- a. The applicant may obtain an application form online, from the ADAF office or from the ADA constituent or component dental society in the area where the applicant resides (**see page 48 for application**). Application forms are composed of two parts: Part I requests verified information about the loss, the extent of damages, insurance coverage and any other sources of assistance.

Part I of the application shall be forwarded by the applicant to the ADA constituent/ component society which in turn shall appoint an individual or group as the verifier(s) for the application.

Part II requests confidential financial data about the applicant's resources. Part II of the application along with the applicant's most recent year's federal income tax return, (or, if married and filing separate returns, the income tax returns of both the applicant and spouse), a written statement from a bank representative, accountant or financial planner attesting to the accuracy of the financial information, and the bank refusal shall be forwarded by the applicant directly to the office of the ADA Foundation to ensure confidentiality.

- b. Upon receiving Part I of the application from the applicant the ADA component dental society through its designated verifier shall determine and attest that (1) in its judgment, a disaster did occur under the definition provided in these *Rules*; (2) the disaster was declared by a governmental agency, if applicable; (3) the application form was completed by the applicant who is submitting the request; (4) the requested loan amount has been indicated by the applicant; (5) the damages claimed are a result of the disaster; and, (6) the damages appear to be commensurate with the requested claim. This may require, for example, a visual inspection by the verifier or a copy of an insurance claim report.

5. **Term of Loan.** The term for any disaster loan shall be determined at the discretion of the ADAF Board but shall not exceed three years, except in unusual circumstances and as determined by the ADAF Board on a case-by-case basis.
6. **Amount of the Loan.** The loan amount for any disaster applicant shall be determined at the discretion of the ADAF Board based on applicant needs, but shall not exceed \$25,000.
7. **Community Service.** The primary reason for making disaster loans is to assist dentists to continue to provide dental care to communities affected by disasters. Therefore, the applicant shall certify that he or she intends to practice in the disaster affected area for at least the original term of the loan after the receipt of disaster assistance monies from the ADA Foundation. This certification is part of the application form. If an individual leaves the disaster stricken area to practice elsewhere during the original term of the loan, the ADAF Board shall have the right to call the loan immediately due and payable.

Application for ADAF Disaster Assistance Loan (page 2)

NATURE AND DATE OF DISASTER

Briefly describe the disaster and attach any supporting articles, documents, or pictures. _____

AMOUNT OF DAMAGE SUFFERED TO PRACTICE FACILITY

Structure:	\$ _____	Total Damage	\$ _____
Equipment:	\$ _____	Insurance Coverage	\$ _____
Supplies:	\$ _____	Net Loss after Insurance	\$ _____

INSURANCE COMPANY INFORMATION

Name _____	Amount of Coverage _____
Address _____	Deductible Amount _____
_____	Agent's Name _____
City _____	Agent's Phone _____
State _____ Zip _____	Policy No. _____

IDENTIFY OTHER SOURCES OF FINANCIAL AID OR ASSISTANCE

Amount available from Small Business Administration \$ _____

Amount available from Relatives (Identify individuals and amounts)

_____	\$ _____	
_____	\$ _____	
_____	\$ _____	\$ _____

Amount available from Other Sources (Specify in detail and attach supporting documents)

_____	\$ _____	
_____	\$ _____	
_____	\$ _____	\$ _____

Application for ADAF Disaster Assistance Loan (page 3)

CERTIFICATION BY THE APPLICANT

I certify that I suffered a disaster to my dental practice, equipment or supplies as detailed herein on this application.

I intend to continue practicing in this community after this disaster for the term of the disaster loan, if granted. If the loan is granted and I stop practicing in this community, I understand that the outstanding balance will become due and immediately payable to the ADA Foundation at the sole discretion of its Board of Directors.

I certify that the information contained in Part I and Part II of this application is true and complete. I understand that a fraudulent representation or omission of any information requested in either Part I or Part II of this application is grounds for immediate refusal to grant any loans under this program, and is grounds for the Board of Directors, in its sole discretion, to declare any outstanding balance due and immediately payable to the ADA Foundation.

I understand that the granting of such a loan is neither a right nor entitlement and that the Board of Directors of the ADA Foundation shall have sole discretion in determining whether I qualify for a disaster loan.

I understand that I am obligated to provide the ADA Foundation within six months of the granting of a disaster loan, copies of receipts, invoices or bills of sale verifying the use of the loan proceeds for repair or reconstruction of the practice facility, or for the repair or replacement of damaged equipment or supplies.

I hereby agree to reimburse the ADA Foundation for any collection costs, including attorneys' fees, incurred in collecting the amounts due to the ADA Foundation. I further agree that any information disclosed in this application may be used in connection with the aforementioned collection activities.

I hereby request consideration for a disaster assistance loan in the amount of \$_____ for a term of three years and agree to abide by the *Administrative Rules* of the ADA Foundation's Disaster Loan Program.

Signed _____ Date _____
(Applicant)

AFFIRMATION OF DENTAL SOCIETY

Component Society:

This is to certify that the _____ (Component Society) confirms that the applicant named herein has suffered a disaster and that the information contained in Part I has been verified and is true and complete to the best knowledge of the investigator and the component society.

Signed _____ Date _____
Executive Director or Officer of Component Society

Print Name _____ Telephone _____

Constituent Society:

This is to certify that the _____ (Constituent Society) confirms that all facts in the application are verified and this constituent society concurs in the eligibility of the applicant named herein for disaster loan assistance.

Signed _____ Date _____
Executive Director or Officer of Constituent Society

Print Name _____ Telephone _____

For ADA Foundation use only

Loan No. _____



American Dental Association Foundation

211 East Chicago Avenue
Chicago, Illinois 60611-2678
(312) 440-2763

Application for ADAF Disaster Assistance Loan (page 4)



American Dental Association Foundation

211 East Chicago Avenue
Chicago, Illinois 60611-2678
(312) 440-2763

**PART II: To be completed by applicant and submitted directly to the ADA Foundation,
211 East Chicago Avenue, Chicago, Illinois 60611-2678**

Name _____ Address _____
City _____ State _____ Zip _____
Current Phone No. _____

Total Income of Applicant

(Be sure to answer for each item – write “none” where applicable)

	<u>Received During Past Year</u>	<u>Expected During Current Year</u>
Dental Practice: Gross Income	\$ _____	\$ _____
Practice Expenses	\$ _____	\$ _____
Net Income	\$ _____	\$ _____
Interest Income	\$ _____	\$ _____
Rental Income	\$ _____	\$ _____
Dividend Income.....	\$ _____	\$ _____
Capital Gains.....	\$ _____	\$ _____
Disability Insurance Payments	\$ _____	\$ _____
Social Security Benefits	\$ _____	\$ _____
Veteran’s Compensation	\$ _____	\$ _____
Other Income (specify)	\$ _____	\$ _____

Total Expenses of Applicant

(Be sure to answer for each item – write “none” where applicable)

	<u>During Past Year</u>	<u>Expected During Current Year</u>
Income and Other Taxes	\$ _____	\$ _____
Rental Payments, Co-op or Condo Assessments	\$ _____	\$ _____
Mortgage Payments: Residential	\$ _____	\$ _____
Investment	\$ _____	\$ _____
Property Taxes: Residential	\$ _____	\$ _____
Investment	\$ _____	\$ _____
Interest & Principal Payments on other Loans	\$ _____	\$ _____
Insurance.....	\$ _____	\$ _____
Investments (including tax shelters)	\$ _____	\$ _____
Alimony	\$ _____	\$ _____
Child Support (Income)	\$ _____	\$ _____
Medical Expenses	\$ _____	\$ _____

Other Major Expenses: List (e.g. Savings, Contributions to Pension Plans, Professional Insurance, etc.)

List below other individuals who financially support you on a regular basis and indicate their relationship.

Name	Relationship	Monthly Support
_____	_____	_____
_____	_____	_____
_____	_____	_____

I hereby authorize any person, firm, corporation, agency or institution to furnish to the ADA Foundation any and all information in its possession relative to my assets, deposits, dealings or business of any kind whatsoever. I certify that the financial information contained in this application to the ADA Foundation is true and complete. My spouse (if applicable) and I have no assets or resources other than those disclosed in this application.

Signed _____ Date _____
(Signature of Applicant)

Note: Applicant shall attach a copy of the most recent year’s Internal Revenue Service form 1040 tax return and all schedules submitted thereto. If married and filing separately, the tax returns of both the applicant and spouse are required. Applicants who have an incorporated dental practice shall submit, in addition, the corporate tax Form 1120.

Application for ADAF Disaster Assistance Loan (page 5)

Please complete sections A-G. If additional space is needed, please copy or download this page.

A. BANK, S&L AND CREDIT UNION ACCOUNTS

(A list of bank accounts, certificates of deposit, money market accounts and savings accounts. If additional space is needed, please copy or download another worksheet.)

1. Name and Location of Bank _____	2. Type of Account _____	3. Cash Balance _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

B. REAL ESTATE

The legal and equitable title to all real estate listed in this statement is solely in the name of the undersigned, except as follows: _____

1. Description	2. Outstanding Mortgages or Liens	3. Monthly Payment	4. Assessed Value	5. Est. Fair Mkt. Value	If applicable, unpaid taxes:	
_____	\$ _____	\$ _____	\$ _____	\$ _____	6. Year _____	7. Amount \$ _____
_____	\$ _____	\$ _____	\$ _____	\$ _____	_____	\$ _____

C. LOANS

1. Loan Held By: (Name and Address) _____	2. Amount Of Loan _____	3. Amount Owing _____	4. Pay Off Date _____	5. How Endorsed Guaranteed or Secured _____
_____	\$ _____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____	\$ _____

D. ACCOUNTS RECEIVABLE

(A list of the largest amounts owing to applicant and spouse)

Name and Address of Debtor _____	1. Amount Owing _____	2. Date Payment Expected _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

E. LIFE INSURANCE

1. Name of Insured _____	2. Name of Beneficiary _____	3. Name of Insurance Co. _____	4. Type of Policy _____	5. Face Amount of Policy _____	6. Total Cash Surrender Value _____	7. Total Loans Against Policy _____	8. Is Policy Assigned? _____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

F. STOCKS AND SECURITIES OTHER THAN GUARANTEED U.S. GOVERNMENT SECURITIES AND GOVERNMENT AGENCIES

1. Face Value (Bonds No. of Shares (Stocks) _____	2. Description Of Security _____	3. Present Market Value _____	4. Income Received Last Year _____	5. To Whom Pledged _____
_____	_____	\$ _____	\$ _____	_____
_____	_____	\$ _____	\$ _____	_____
_____	_____	\$ _____	\$ _____	_____

G. RETIREMENT PLANS

(A list of IRAs, 401(K), Keogh plans, profit-sharing or pension plans.)

1. Type _____	2. Most Recent Valuation _____	3. Date of Valuation _____
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____

Application for ADAF Disaster Assistance Loan (page 6)

ASSETS AND LIABILITIES

I make the following statement of all assets and liabilities owned by me and/or my spouse individually or jointly, in any manner as of the _____ day of _____, _____, and give other material information for the purpose of obtaining a loan with you bearing my signature, endorsement, or guarantee, and agree to notify you promptly of any change affecting my ability to pay. The ADA Foundation may require from time to time that the applicant pledge collateral in certain instances.

Please answer all questions using “No” or “None” when necessary.

Assets	<u>Before Disaster</u>	<u>After Disaster</u>
1. Cash on hand, and unrestricted in banks	\$ _____	\$ _____
2. Accounts Receivable	\$ _____	\$ _____
3. Retirement Plans (401K, IRA, Keogh)	\$ _____	\$ _____
4. Stocks and Securities	\$ _____	\$ _____
5. Real Estate	\$ _____	\$ _____
6. Dental Practice	\$ _____	\$ _____
7. Personal Property	\$ _____	\$ _____
8. Other Assets	\$ _____	\$ _____
9. TOTAL ASSETS	\$ _____	\$ _____

Liabilities and Net Worth

10. Loans	\$ _____	\$ _____
11. Loans Against Life Insurance	\$ _____	\$ _____
12. Accounts Payable	\$ _____	\$ _____
13. Real Estate Payable	\$ _____	\$ _____
14. Income Tax Payable	\$ _____	\$ _____
15. Outstanding Mortgage or Liens	\$ _____	\$ _____
16. Brokers Margin Accounts	\$ _____	\$ _____
17. Credit Cards	\$ _____	\$ _____
18. Other Liabilities (itemize)	\$ _____	\$ _____
19. TOTAL LIABILITIES	\$ _____	\$ _____
20. NET WORTH (Line 9 minus Line 19)	\$ _____	\$ _____

Verification of Financial Statement:

Note: This section must be verified and signed by a bank representative, accountant or financial planner attesting to the accuracy of the financial data contained in the application.

I hereby certify that the financial information contained in this application is true and correct to the best of my knowledge.

Signed: _____
 Name: _____
 Title: _____
 Address: _____
 City: _____
 State: _____ Zip: _____
 Phone: (_____) _____

Refusal of Bank to Grant Loan:

I hereby certify that the individual making this application for a disaster assistance loan to the ADA Foundation has been refused a loan at prevailing commercial rates for the total amount of the requested funds listed in this application.

Signed: _____
 Name: _____
 Title: _____
 Address: _____
 City: _____
 State: _____ Zip: _____
 Phone: (_____) _____



American Dental Association Foundation

Preparing Applications for ADAF Disaster Grant

The following *Rules* are designed to facilitate the administration of the disaster grant programs under the auspices of the ADA Foundation. These *Rules* shall govern all applications for, and approval of, all disaster grants arranged through the ADA Foundation. The ADA Foundation Board of Directors may amend these *Rules* at its sole discretion.

General Purpose: The purpose of disaster grants is to make emergency dental care available in areas affected by disasters and provide assistance to members of the dental profession who are victims of disasters. The ADA Foundation provides disaster grants in the following areas:

- grants to dentists who have been affected by disasters to assist with immediate needs.
- grants to organizations which can provide dental services to affected areas

However, the ADA Foundation may conduct additional charitable programs, as appropriate, and as determined by its Board of Directors (“Board”) from time to time, if the Board first obtains a ruling from the Internal Revenue Service or an opinion of counsel that such programs will not jeopardize the ability of the ADA Foundation to obtain or retain a tax exemption under section 501(c)(3) of the Internal Revenue Code.

Responsibility for Programs: The Board shall have the responsibility for administration of all the programs designed by the ADA Foundation. The awarding of grant monies is at the sole discretion of the Board and is not a right or entitlement of the applicant. Activities are funded through charitable contributions and earnings on funds held.

Fundraising: The ADA Foundation may, at its discretion, conduct a campaign or other fundraising activities to solicit monies in order to allow it to conduct its charitable purposes. The ADA Foundation may at any time suspend any or all loan or grant activity when, in the opinion of the Board, there are insufficient monies available to continue specific program activity, or when in the opinion of counsel, continuation of the activity may jeopardize the ability of the ADA Foundation to obtain or retain a tax exemption under section 501(c)(3) of the Internal Revenue Code. The ADA Foundation may, at the discretion of the Board, make charitable grants to other section 501(c)(3) dental-related organizations.

Application: The ADA Foundation shall design and make available applications forms. In order to ensure accuracy, all application forms shall be submitted typed in English.

General Eligibility Requirements: Applicants to the disaster grant program of the ADA Foundation are not required to be members of the American Dental Association in order to be eligible for receipt of monies. No information shall be sought from applicants to

Preparing Applications for ADAF Disaster Grant (page 2)

ascertain their status as such a member or non-member, and no consideration will be given to such membership status in evaluating applications.

Current officers, directors, and employees of the ADA Foundation, and their spouses, dependent children and parents; and current officers, directors, trustees, assistant and associate executive directors, and the executive director of the American Dental Association, and their spouses, dependent children, and parents, shall not be eligible to apply for or receive any loans, grants, scholarships or other financial assistance from the ADA Foundation.

The following definition applies in determining eligibility:

Dentist: any individual currently residing in the United States or its territories, who: (1) is a graduate of a predoctoral dental degree program accredited by the Commission on Dental Accreditation as recognized by the U.S. Department of Education and the Council on Post-secondary Education, or (2) currently holds or formerly held a valid dental license in any U.S. state or territory, or (3) is employed by the U.S. Federal Dental Services or an accredited dental school recognized by those agencies listed in (1) above.

Application Review: The Board shall be the sole authority for accepting and denying applications unless a review committee is so authorized by the Board. When an ADA constituent/component society investigation occurs, either the applicant or the society shall forward the respective application materials to the ADA Foundation office for review and final determination.

Verification of Financial Data: As one method to verify financial data, a grant or organizational applicant may be asked to submit the most recent year's federal income tax return with the application. If the applicant is married but filed a separate tax return, the returns of both the applicant and spouse may be required.

All applicants authorize the ADA Foundation to make such inquiries as may be necessary to independently verify the accuracy of any of the submitted application information, if needed.

Grants to Dentists Affected by Disasters

1. Purpose: The purpose of disaster grants is to provide a small measure of immediate financial assistance to needy eligible beneficiaries, as defined in this section, who are victims of a disaster. A disaster is defined as a “sudden occurrence which inflicts widespread catastrophic damage to a large geographic area and/or which generally affects a large number of individuals”. Disasters can be both natural and caused by human conduct. Examples include, but are not necessarily limited to: civil disorders (excluding acts of war), explosions, fires, tornadoes, earthquakes, floods, tidal waves, forest fires and hurricanes.

Preparing Applications for ADAF Disaster Grant (page 3)

2. Eligible Beneficiaries: Any dentist who is a victim of a disaster may apply to the ADA Foundation for a grant. Since the purpose of these grants is to give a measure of immediate or proximate assistance, all requests for such grants shall be made within 2 months of the occurrence of the disaster.
3. Circumstances Determining Eligibility for Grants: Criteria for determining eligibility of disaster grants are listed below. Any application for a disaster grant that does not meet **all** of these criteria will be denied.
 - a. As a result of the disaster, the applicant must show that he or she suffered property damages.
 - b. A “disaster” must be declared by a governmental agency, or be determined by the Board in accordance with the definition provided in paragraph 1 above.
4. Evaluation of Application and Procedures for Processing:
 - a. The applicant may obtain an application form either from the office of the ADA Foundation or from the ADA constituent or component dental society in the area where the applicant resides.
 - b. Upon receiving the application from the applicant the ADA constituent/ component dental society through its designated investigator shall determine and attest that (1) in its judgment, a disaster did occur under the definition provided in these *Rules*, (2) the disaster was declared by a governmental agency, if applicable, (3) the applicant suffered damages, (4) the application form is signed by the applicant and (5) the damages appear to be commensurate with the requested claim. This may require, for example, a visual inspection by the investigator or a copy of an insurance claim report.
 - c. Eligibility is determined on a case-by-case basis after evaluating the applicant’s loss and his/her need.
5. Term of Grant: Grants for disaster assistance shall be offered only once per applicant per disaster as defined in these *Rules*.
6. Amount of the Grant: The grant amount for any disaster applicant shall be determined at the discretion of the Board based on applicant needs, but shall not exceed \$2,500, depending on funds available.

Preparing Applications for ADAF Disaster Grant (page 4)

Grants to Organizations to Provide Dental Care Following Disasters

1. Purpose: The purpose of grants to organizations is to provide needed dental care in communities affected by a disaster, as defined in these *Rules*.
2. Eligible beneficiaries: Any dental-related organization that can provide dental services to victims of a disaster is eligible for participation in such grants. These organizations must be recognized as exempt under section 501(c) (3) of the Internal Revenue Code and will be required to submit copies of the organization's *Bylaws*, incorporating documents and its exemption recognition by the IRS.
3. Circumstances Determining Eligibility for Grants: Criteria for determining eligibility for organizational disaster grants are listed below. Any application for a disaster grant that does not meet **all** of these criteria will be denied.
 - a. A “disaster” must be declared by a governmental agency, or be determined by the Board in accordance with the definition provided in paragraph 1 above.
 - b. Emergency dental care is needed by victims of the disaster.
4. Evaluation of Application and Procedures for Processing:
 - a. The applicant should supply a proposal for consideration by the Board. This may be submitted directly to the office of the ADA Foundation.
 - b. Upon receiving the proposal from the organization, the ADA Foundation will contact the ADA constituent/component dental society to determine and attest that (1) in its judgment, a disaster did occur under the definition provided in these *Rules* and (2) the disaster was declared by a governmental agency, if applicable.
5. Term of Grant: Grants for disaster assistance shall be offered only once per organization per disaster.
6. Amount of the Grant: The grant amount for any disaster applicant shall be determined at the discretion of the Board based on applicant needs. The requested amount shall be stipulated in the proposal submitted by the organization.



American Dental Association Foundation

GRANT APPLICATION FOR DENTISTS AFFECTED BY DISASTER

(Please Print Clearly All Information on This Form)

Name _____

Office Address _____ City, State, Zip _____

Home Address _____ City, State, Zip _____

Telephone (Home) _____ (Office) _____ E-mail _____

Plases provide your temporary contact information:

Address _____ City, State, Zip _____

Telephone/Cell _____ E-mail _____

Briefly describe the nature and date of the disaster and provide details on the property damage sustained (attach additional sheet if necessary).

Briefly describe how you plan to use emergency funds (attach additional sheet if necessary).

Do you have insurance coverage for your practice facility? _____

What is the net loss after insurance coverage? \$ _____

Do you have insurance coverage on your home? _____

What is the net loss after insurance coverage? \$ _____

Name of Insurance Company _____

What is your estimate of your total loss in this disaster?(excluding lost income) \$ _____

Application for ADAF Disaster Grant (page 2)

Nature of financial resources (please indicate the extent of your financial insurance as expected by this disaster).

What is your approximate net worth? \$_____

Please indicate whether or not you are able to use your available resources to help with this disaster?

Certification by Applicant

I certify that I have suffered a disaster to my dental practice and/or residence as stated in this application.

I certify that the information contained in this application is true and complete. I understand that a fraudulent representation or omission of any information requested is grounds for immediate refusal to grant assistance under this program.

I understand that the granting of such assistance is neither a right nor entitlement and that the Board of Directors of the ADA Foundation shall have sole discretion in determining whether I qualify for assistance.

Signed_____ Date_____

Affirmation of Dental Society

This is to verify that the applicant named herein is a dentist and has suffered a disaster and that the information contained herein is true and complete to the best knowledge of the investigator. The investigator recommends emergency assistance for this applicant.

Signed_____ Date_____

Executive Director/Designated Officer, Component/Constituent Society

Please forward your completed and signed application to your state dental society by fax or regular mail. For Florida only: 1111 E. Tennessee St., Tallahassee, FL 32308; Fax – (850) 681-0116.

THE ADA FOUNDATION
211 EAST CHICAGO AVENUE
CHICAGO, ILLINOIS 60611
(312) 440-2763