OMB Control Number: (OMB# 2528-NEW)

Appendix G – Renter Survey

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Q51 You are being asked to participate in this survey if you were a renter at the time of a hurricane while residing in the State of Florida.

The purpose of this survey is to understand renter needs after disasters.

Please keep in mind the following: The survey will take between 10 and 15 minutes to complete. We have taken steps to make sure your private information is protected. Your information will be combined with information from other participants in the study. Your name will not be attached to the answers you give. No one outside the study team will see the answers. Being a part of the study is voluntary. You can stop at any time for any reason without penalty.

For more information please review the information sheet attached <u>here</u>.

U I consent, begin the study	(1)

I do not consent, I do not wish to participate (2)

End of Block: Introduction

Start of Block: Impacts of Recent Hurricanes

Q1 Impacts of Recent Hurricanes

our home or contents, forced or voluntary relocation, job loss, or other indirect impacts.
Hurricane Ian (2022) (1)
Hurricane Idalia (2023) (2)
Michael (2018) (3)
Irma (2017) (4)
Hurricane Maria (2017) (5)
Hermine (2016) (6)
Matthew (2016) (7)
Other (8)
Other (8)

Have you been affected by any or all of the following hurricanes? This could include physical damage to

you. Which hurricane had the most severe impact on you? O Hurricane Ian (2022) (1) Hurricane Idalia (2023) (2) Michael (2018) (3) O Irma (2017) (4) Hurricane Maria (2017) (5) Hermine (2016) (6) Matthew (2016) (7) Other (8) _____ Q3 In what zip code were you living at the time of the hurricane?

Q2 For the next series of questions, please consider the hurricane that had the most severe impact to

Q4 What type of housing were you living in at the time of the hurricane?
Mobile home, RV, or trailer (1)
O Single-family home (2)
O Duplex or quadriplex (3)
O Apartment in an apartment building (4)
Other (please specify): (5)
Q5 Does your household pay reduced rent because of rental assistance vouchers (not including temporary COVID aid)?
Yes, rental assistance covers less than half of my household's rent (1)
O Yes, rental assistance covers about half of my household's rent (2)
O Yes, rental assistance covers all or most of my household's rent (3)
O No, my household does not receive rental assistance (4)
Q6 Is the housing authority your landlord?
O No (1)
O Yes (2)

Q7 Does the Federal, State, or local government pay	som	ne of	the c	ost o	f you	ır ho	using	unit	?		
O No (1)											
O Yes (2)											
Q8 Was there physical damage to your home or con	tents	s as a	resu	lt of	a hur	ricar	ne?				
O No (1)											
O Yes (2)											
Q9 How severe was the damage on a scale from 0 (r	no da	mag	e) to	100 (total	loss)?				
				On a	scal	e froi	n 0 t	o 100)		
	0	1	2	3	4	5	6	7	8		1
		0	0	0	0	0	0	0	0	0	0
Home damage ()											
						J					
Contents damage ()											

Q10 Did you have to leave your home for a period of time after the hurricane?
O No (1)
O Yes (2)
Q11 How long were you out of your home?

Q12 Did you face any barriers when it came to returning to your home? Please so	elect a	all tha	it app	ly.	
Damage to home (1)					
Damage to neighborhood (2)					
Utilities out (e.g. Water, Power, Gas) (3)					
Neighborhood unsafe (4)					
Evicted by owners (5)					
Evicted by county (6)					
Job moved (7)					
Schools or day care not open (8)					
Insurance assessment/claims process (9)					
Money/overall costs (10)					
Mold or other health concern (11)					
Other: (12)	-				
Other: (13)	_				
Q13 In the first year, how many times did you relocate? $ 0 1 2 3 4 5 $	6	7	8	9	1

()						-					
Q14 Were you ever unhoused or experienced home	lessn	ess/l	nouse	elessr	ness a	fter	the h	nurrio	cane :	þ	
O No (1)											
O Yes (2)											
Q15 Are you currently living in the same home you v	vere l	livin	g in pı	rior t	o the	hurr	icane	e?			
O No (1)											
O Yes (2)											
Q16 How many days did it take to find temporary ho hurricane?	ousing	g (e.g	g. hot	el, sh	elter	, apa	rtme	ent) a	fter	the	
			Day	'S			N	ot Ap	oplica	able	
	0	1		3	4		6	7	8	9	1 0 0
Temporary housing ()						-					

	or stable housing after the hur Weeks					٨	lot A	able			
	0	1	2	3	4	5 0	6	7 0	8	9	(
Permanent/stable housing ()						-					
	.2										
.8 What type of housing are you living in currently Mobile home, RV, or trailer (1)	/										
O Single-family home (2)											
O Duplex or quadriplex (3)											
O Apartment in an apartment building (4)										_	
Other (please specify): (5)											

) Currently, do you own or	Tent your nome:		
Own (1)			
Rent (2)			
Other: (3)			_
	ou were living in before	e the hurricane, how would	d you compare you
	ou were living in before Better (1)	e the hurricane, how would The same (2)	d you compare you Worse (3)
rent home?			
Cost (1) Unit size/layout (2) Property appearance			
Unit size/layout (2) Property appearance (fresh paint, clean halls,			
Cost (1) Unit size/layout (2) Property appearance resh paint, clean halls, etc.) (3)			

Start of Block: Assistance

Q22 During the preparedness and recovery efforts of the disaster, where did you receive your information from?
Word of mouth (1)
Social Media (2)
Local News (3)
Nonprofit organizations (4)
Religious organizations (5)
Other (please specify) (6)
Landlord (7)

Q23 Since the impacts relative from any emotions								
Family (1)								
Politicians (2)								
Neighbors	(3)							
Government offici	als/civil service (4)							
Friends	(5)							
Charitable organiz	ations/NGO (6)							
Friends who are n	ot neighbors (7)							
Religious leaders	(8)							
Community leader	rs (9)							
Other (please spe	ecify) (10)							
Q24 What government or private financial support did you apply for after the hurricane?								
		Applied?	Wordt ouer of this					
	Yes (1)	No (2)	Wasn't aware of this program (3)					

a. FEMA assistance (1)	O	0	0
b. SBA (Small business Administration) loan (2)	0	0	0
c. Private/bank loans (3)	0	0	0
d. Other recovery program (please specify): (4)	O	0	0
e. Other recovery program (please specify): (5)	O	0	0
'			

Q25 What financial support did you receive?

	Recei	ved?
	Yes (1)	No (2)
a. FEMA assistance (1)	0	0
b. SBA (Small business Administration) loan (2)	0	0
c. Private/bank loans (3)	0	0
d. Other recovery program (as previously specified) (4)	0	0
e. Other recovery program (as previously specified) (5)	0	0

Q26 Did you receive financial support from friends, family or non-governmental organizations?

	Receive	d?
	Yes (1)	No (2)
a. Financial support from friends and family (1)	0	0
b. Financial support from your employer (2)	0	0
c. Financial support from your neighbors (3)	0	0
d. Financial support from a religious organization or church (4)	0	0
e. Financial support from a nonprofit or other non- governmental organizations (please specify): (5)	0	0
Q27 Did you have any of the follow apply. Renter's insurance (1) Flood insurance (NFIP) for o	ing insurance at the time of the hurri	cane? Please select all that

Q28 Did you receive a payout from your insurance	ce for da	amag	es?								
O No (1)											
O Yes (2)											
Q29 Approximately what percent of your recove programs?	ry costs	were	e cove	ered	by in	surar	nce a	nd/o	r reco	overy	
	0	1	2	3	4	5	6	7	8	9	1
		0	0	0	0	0	0	0	0	0	0 0
%	6 ()			_		-	_	_	_	I	

Q30 Did you face any barriers to receiving financial support from these programs? Please select all that apply.

	a. FEMA assistance (1)	b. SBA (Small business Administration) loan (2)	c. Private/bank Ioans (3)	d. Financial assistance from a nonprofit or other non- governmental organizations (as previously specified) (4)	e. Other recovery program (as previously specified) (5)	f. Other recovery program (as previously specified) (6)
Eligibility requirements (1)						
Paperwork challenges (e.g. language barrier or amount) (2)						
Income requirements (3)						
Timing of assistance (4)						
Awareness or information (5)						
Other (please specify): (6)						

Q31 Did you receive any other (non-financial) assistance related to the hurricane?
Legal counseling (1)
Clean-up or repair assistance from friends and family (2)
Clean-up or repair assistance from a church, nonprofit, or other non-governmental organization (3)
Training on recovery or preparedness (4)
Job training (5)
Supplies or donations (e.g. food, clothing, water) (6)
Mental health support
Other (please specify): (7)
End of Block: Assistance
Start of Block: Recovery
Q32 What were your immediate needs/concerns in the first three months after the hurricane? Please provide the top 3.
Need #1 (1)
Need #2 (2)
Need #3 (3)

Q33 What were your long-term needs in the first 1-2 years after the hurricane? Please provide the top 3.
Need #1 (1)
Need #2 (2)
Need #3 (3)
Q34 Would you say your are fully recovered from the hurricane? Where are you in the process of recovery?
O Still in survival/response mode (1)
Recovering (2)
O Mostly recovered (3)
O Fully recovered (4)
End of Block: Recovery
Start of Block: Employment

Q35 Which of the following categories best describes your employment status prior to the hurricane?
Employed, working full-time (1)
O Employed, working part-time (2)
O Not employed, looking for work (3)
O Not employed, NOT looking for work (4)
Retired (5)
O Disabled, not able to work (6)
Q36 Which of the following categories best describes your employment status after the hurricane?
Employed, working full-time (1)
Employed, working part-time (2)
O Not employed, looking for work (3)
O Not employed, NOT looking for work (4)
Retired (5)
O Disabled, not able to work (6)

Q37 What was your annual household income prior to the hurricane?
O Under \$15,000 (1)
Detween \$15,000 and \$29,999 (2)
Detween \$30,000 and \$49,999 (3)
Detween \$50,000 and \$74,999 (4)
Detween \$75,000 and \$99,999 (5)
O Between \$100,000 and \$150,000 (6)
Over \$150,000 (7)
Q38 What was your annual household income after the hurricane?
O Under \$15,000 (1)
O Between \$15,000 and \$29,999 (2)
O Between \$30,000 and \$49,999 (3)
O Between \$50,000 and \$74,999 (4)
O Between \$75,000 and \$99,999 (5)
O Between \$100,000 and \$150,000 (6)
Over \$150,000 (7)

Q39 What industry did you work in prior to the hurricane?
O Natural Resources and Mining (1)
O Construction (2)
Manufacturing (3)
Retail/Wholesale Trade (4)
O Transportation (5)
O Utilities or waste services (6)
Information (e.g. software, publishing) (7)
O Finance (8)
Real Estate and Rental and Leasing (9)
O Professional and Business Services (e.g. accounting, tax preparation, advertising) (10)
O Education (11)
Health Services (12)
O Arts, Entertainment, and Recreation (13)
Accommodation and Food Services (14)
O Agriculture (15)
Other (16)

Q40 What industry did you work in after the hurricane?
O Natural Resources and Mining (1)
O Construction (2)
Manufacturing (3)
Retail/Wholesale Trade (4)
O Transportation (5)
O Utilities or waste services (6)
O Information (e.g. software, publishing) (7)
O Finance (8)
Real Estate and Rental and Leasing (9)
O Professional and Business Services (e.g. accounting, tax preparation, advertising) (10)
O Education (11)
O Health Services (12)
O Arts, Entertainment, and Recreation (13)
O Accommodation and Food Services (14)
O Agriculture (15)
Other (16)

Q41 In the year after the hurricane, how confident did you feel that you were able to pay all your bills each month, including rent, utilities, food, childcare, transportation, etc.?
Completely confident (1)
O Fairly confident (2)
O Somewhat confident (3)
O Slightly confident (4)
O Not confident at all (5)
End of Block: Employment
Start of Block: Health
Start of block. Health
Q42 Were there any pre-existing health concerns for you or your family that impacted your recovery process?
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Q42 Were there any pre-existing health concerns for you or your family that impacted your recovery process? O Yes (1) No (2)
Q42 Were there any pre-existing health concerns for you or your family that impacted your recovery process? O Yes (1)
Q42 Were there any pre-existing health concerns for you or your family that impacted your recovery process? O Yes (1) No (2) Q43 Do you or does someone in your family have a disability? No (1)
Q42 Were there any pre-existing health concerns for you or your family that impacted your recovery process? O Yes (1) No (2) Q43 Do you or does someone in your family have a disability?

ost-traumatic stress disorder, depression, anxiety, or other.
O Yes, frequently (1)
O Yes, sometimes (2)
O No (3)
nd of Block: Health
tart of Block: Demographics
045 How old are you?

Q44 After the hurricane, did you or any member of your household experience mental distress including

Q48 What is your race?
O Asian (1)
O Native Hawaiian or other Pacific Islander (2)
O Black or African American (3)
O White (4)
O American Indian or Alaska Native (5)
O More than one race (6)
Other (please specify) (7)
Q49 What is your marital status?
O Single (1)
O Married or living together (2)
O Widowed (3)
O Divorced (4)
O Separated (5)

Q50 Are you a veteran?
O No (1)
O Yes (2)
Q51 What is the highest level of education you have completed?
O Some high school (1)
O High school graduate (2)
O GED (3)
O Vocational/technical certification (4)
O Associate degree (5)
O Some college (6)
O College degree (7)
Other (please specify) (8)

Q52 Were you born in the United States?
O No (1)
O Yes (2)
O Prefer not to answer (3)
Display This Question:
If Were you born in the United States? = No
Q53 If no, how long have you been living in the United States?
O Less than one year (1)
Between 1-3 years (2)
O Between 3-5 years (3)
O Between 5-10 years (4)
Over 10 years (5)
Display This Question:
If Were you born in the United States? = No

Q54 If no, how well do you speak English?
O Very well, native or close to native speaker (1)
O Somewhat well, I can speak and be understood (2)
O Not very well, only a little bit when needed (3)
O Not at all (4)
Q55 Do you have children?
O No (1)
O Yes (2)
Display This Question:
If Do you have children? = Yes
Q56 If yes, what are their ages? Please indicate the number of children that are in each category.
O New born - 5 years old (1)
O 5 - 10 years old (2)
O 10 - 15 years old (3)
O 15 - 17 years old (4)
O Adult children (18 and older) (5)