

# Genesee/Finger Lakes Region Road Deicing & Storage Inventory Survey

Survey Completed by:

Name/Title:	
Municipality/Organization:	
Address:	
City, State, ZIP	
Telephone # (w/area code)	
Fax # (w/area code)	
E-mail address	

1) Do you use deicing material(s)?      Yes:       No:       Contract:

If the answer to question #1 is **Contract**, please complete this survey to the best of your ability or provide us with the contact information of the contractor.

2) What type of deicing material do you use?      Salt:       Sand:   
    CaCl:       Ice Ban:   
    Other (specify):

3) Do you use more than one (1) type of deicing material?      Yes:       No:

4) What is the ratio of salt to sand (or other materials) in your mix?

5) Do you mix your own material?      Yes:       No:

6) What is your policy regarding when to apply deicing material (i.e. – one inch of snow on the ground, etc...)?

7) How many miles of road do you salt within your jurisdiction (Paved/Dirt)?      Paved:       Dirt:

8) What is the rate of deicing materials applied to....      Paved:       Dirt:

9) Please list the total Mileage for each of the entities that you provide services for, including parking lots and entrances.

State Roads: <input type="checkbox"/> (Miles)	Village Roads: <input type="checkbox"/> (Miles)
County Roads: <input type="checkbox"/> (Miles)	State Parks: <input type="checkbox"/> (Miles)
Town Roads: <input type="checkbox"/> (Miles)	Private: <input type="checkbox"/> (Miles)

10) How many Tons of salt did you apply in the 2002-03 winter season?

11) How many Tons of salt did you apply in the 2001-02 winter season?



**PLEASE CONTINUE SURVEY ON REVERSE SIDE**



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12) Is a record kept of the rate of application (i.e. – salt per mile)? Yes:  No:

13) If the answer to #12 is YES, how is this determined (i.e. – trucks calibrated, etc...)?

14) How is your salt stored? In the open:  Enclosed storage area:

15) Is your salt stored on.... Pavement:  Gravel/Dirt:   
Other:

16) How old is your storage facility?

17) What type of storage facility do you have?

Concrete Block:	<input type="text"/>	Pole Shed (roof only):	<input type="text"/>
Dome:	<input type="text"/>	Pole Shed (w/sides):	<input type="text"/>
Other (Specify):	<input type="text"/>		

18) What type of dust control material do you use during the summer?

19) How many miles of road within your jurisdiction have dust control applied?

20) Please mark where your salt storage facility/facilities are located on the attached map and provide the address information below:

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Additional comments or information:

**Thank you for taking the time to complete this important survey!**



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