



A RESILIENT FUTURE WITH KOOP COMMUNITIES

Thank you for taking the time to complete this important survey. As part of our mission to build sustainable KOOP Communities—self-reliant systems that provide clean water, renewable energy, nutritious food, responsible waste solutions, and economic opportunity—we are gathering foundational information to better understand the needs of underserved and remote communities like yours. This questionnaire is designed to be simple and accessible to anyone, and will help our engineering team develop customized, sustainable solutions that improve quality of life while honoring local knowledge and resources. Your input is essential in shaping a resilient, healthy, and empowered future for your community.

Project Details	
Location:	
Point of Contact:	
Areas of Interest: □ Fresh Water □ Rene	wable Energy □ Waste Processing
□ Sustainable Agriculture	Circular Economy
© WATER	
1. What is your main source of water at the	moment? 3. On average, how many hours a day do you have access to water?
□ River of stream	hours
□ Well □ Rainwater collection	4. How many people use this water source
□ Delivered by truck	daily (including adults & children)?
\Box Composting or food waste reduction	people
□ Public tap or community source□ Ocean desalination	
□ Other:	
	5. Have you noticed any health issues that may be related to water (i.e. stomach
2. Is your current water supply safe to drink	aches, rashes, etc.)?
without treatment?	
□ Yes	□ Yes
□No	□ If yes, please describe:
□ Not sure	



→ ENERGY

1.	What is your current source of electricity?
	□ National power grid □ Generator □ Solar panels
	□ No electricity □ Other:
2.	Do you have regular access to electricity each day?
	□ Yes □ No
	□ If yes, how many hours per day?
3.	Which of the following are powered by electricity in your community? (Check all that apply)
	□ Lights
	□ Fans □ Refrigeration
	□ Charging phones □ Medical equipment
	□ None
4.	Are there important buildings that don't have electricity? (i.e school, church, clinic)
	□ Yes
	□ No
	□ If yes, please list:
5.	Have power outages or electrical issues caused damage to equipment or disrupted daily life?
	□ Yes
	□ No
	□ If yes, please explain:





→ FOOD

1.	Where does most of your food come from?
	□ Local farms □ Markets □ Donations □ Grown by families □ Other:
2.	Are there any food crops currently grown in the community
	□ Yes □ No □ If yes, please list:
3.	Do you experience regular periods of food shortage or hunger?
	□ Yes □ No □ If yes, when does it usually happen?
4.	Is there land available for growing food?
	□ Yes □ No □ If yes, who owns or manages it:
5.	Are there any organizations of people already helping with food or nutrition?
	□ Yes □ No □ If yes, who?:





₩ WASTE

1.	How is most of your community's waste currently handled?
	□ Collected and taken away □ Burned □ Buried □ Dumped in open areas □ Other:
2.	Do you have a designated place to dispose of waste?
	□ Yes □ No
3.	Do you currently separate waste (i.e. food scraps, plastic, landscape/yard debris, etc.)?
	□ Yes □ No □ If yes, how is it separated?
4.	Are there any visible waste-related issues in the area (i.e piles of trash, bad odors, pests)?
	□ Yes □ No □ If yes, please describe:
5.	Has your community ever organized clean-up efforts or waste education programs?
	□ Yes □ No □ If yes, when?:





S COMMERCE

1. Which of these small businesses or income sources exist in your community? (check all that apply)
□ Selling goods
□ Small farms
□ Handicrafts or sewing
□ Food preparation
□ Construction or repairs
□ Other:
2. Do most people in your community have steady income?
□ Yes
□ No
□ It depends
If not, what are the biggest challenges?
3. Are there people with special skills that could suppoert local business (i.e. carpenters, teachers, cooks)
Vici
□ Yes □ No
□ If yes, list examples:
Z IĮ yes, list examples:
4. What goods or services do people need that are difficult to get locally?

5. Is there a marketplace or central area where people can sell, trade, or display products?
□ Yes
□ No
□ If yes, describe the space:



