Emergency Preparedness Checklist

Home Emergency Plan

Emergency Phone #'s at each phone	Yes	No
Meeting Location for House Evacuation	١	
Planned Tornado Shelter Location		
Route Above High Water Areas for		
Flood Evacuation		
Egress Ropes for 2nd story rooms?	Yes	No
Location of Switches to shut off air		
Handling equipment		
Location of wrench to shut off		
Natural gas supply		
Name & Phone # Local Contact		
Name & Phone # Distant Contact		

Portable 72 Hour Emergency Kit (Best when contained in a backpack)

◊Flashlights	◊Toilet Paper	◊Feminine Supplies
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♦ Battery powered radio Paper Towels, Towelettes ♦ Whistle

♦ Batteries (leave in package) ♦ Liquid Soap, Bar Soap ♦ Needle, Thread

♦ Medications (3 day supply)♦ Pliers and Wrench♦ Compass♦ First Aid kit♦ Hat, Gloves♦ Aluminum Foil

◇Plastic Storage Bags
 ◇Notebook & Pen
 ◇Paper Plates, Cups
 ◇Duct Tape
 ◇Garbage Bags
 ◇Extra Pair of Shoes

♦ Plastic Sheeting ♦ Cash, Travelers Checks ♦ Utility Knife

 ◇Lightweight High Energy Food
 ◇Tooth Brushes
 ◇Bottle of Water

(Candy Bars, Granola Bars, etc) \Diamond Tooth Paste \Diamond Roll of Twine

Home Emergency Kit (Portable Kit Items plus Items Below)

♦Mechanical Can Opener
♦Stored Water (3 gal/person)
♦Fire Extinguisher

♦ Canned Foods (9 meals/Person) ♦ Raingear

♦ Plastic Bucket with Lid ♦ Plastic Storage Containers

♦ Household Chlorine Bleach ♦ Paperback Books

♦Diapers, Canned Formula, Bottles
♦Tool Kit

OBlankets, Sleeping Bags

Family Emergency Information

Health employee, I, arrangements to ensure that n	ny family and pets are car	nergency as a Department of have made the following red for while I am on duty. My
	(Phone)	(Name)
My parents will be care (F	ed for by: Phone)	(Name)
My pets will be cared for by: _ (Pho	ne)	(Name)
Other arrangements I have ma		
My next of kin contact is:		
Name:	Phone:	Relationship: