

Emergency Preparedness Binder

Emergency Contacts

In-state relative		() -
Out-of-state relative		() -
School administrator		() -
School administrator		() -
Work colleague		() -
Work colleague		() -
Primary doctor		() -
Primary doctor		() -
Pediatrician		() -
Dentist		() -
Non-emergency police		() -
Non-emergency fire		() -
Water utility		() -
Electricity utility		() -
Gas utility		() -

Reunion Locations

() -	() -
Address _____	Address _____

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Floor Plans

Draw your home's floor plans and include the following features, as well as evacuation routes from each room.



Fire Extinguishers



Gas Shut Off



Smoke Detectors



First Aid Kits



Carbon Monoxide Detectors



Electricity Shut Off



Ladders



Exits




Emergency Preparedness Binder

Copies of Important Documents

- | | | |
|---|--|-------------------------------------|
| <input type="checkbox"/> Passports | <input type="checkbox"/> Social Security cards | <input type="checkbox"/> Home deeds |
| <input type="checkbox"/> Birth certificates | <input type="checkbox"/> Adoption documents | <input type="checkbox"/> Car deeds |
| <input type="checkbox"/> Recent photo IDs | <input type="checkbox"/> Insurance documents | <input type="checkbox"/> Wills |

Copies of Medical Records

- | | | |
|---|--|---|
| <input type="checkbox"/> Immunization records | <input type="checkbox"/> Insurance cards | <input type="checkbox"/> Prescriptions: |
|---|--|---|

 Family Member	 Prescription Name	 Description

Financial Information

- | | |
|---|---|
| <input type="checkbox"/> Photos of credit cards | <input type="checkbox"/> Investment documents |
| <input type="checkbox"/> Copies of checks | <input type="checkbox"/> 401(k) documents |

Pet Information

- | | |
|--|---------------------|
| <input type="checkbox"/> Medical records | Vet _____ |
| <input type="checkbox"/> Vaccine documents | () - |
| <input type="checkbox"/> Current photos | Emergency vet _____ |
| <input type="checkbox"/> Microchip documents | () - |