**Emergency Plan**

This emergency plan is to ensure you are prepared in the event of an unexpected emergency. Fill out one form for each family member.

|  |  |
| --- | --- |
| Keys (names of people who have keys to your home or business.) | |
| Name |  |
| Contact Information |  |
|  |

|  |  |
| --- | --- |
|  | |
| Name |  |
| Contact Information |  |
|  |

|  |  |
| --- | --- |
| Meeting Location (in the event of an emergency.) | |
| Close to home |  |
| Further from home |  |

|  |  |
| --- | --- |
| Out of State Contact Person (to call in the event of an emergency – we recommend designating one family member that lives out of state for all family members to call.) | |
| Name |  |
| Phone |  |

**Emergency Plans/Contact** (names and phone numbers of those you should call in an emergency.)

|  |  |
| --- | --- |
| Name |  |
| Day phone |  |
| Cell phone |  |
| Home phone |  |
| Name |  |
| Day phone |  |
| Cell phone |  |
| Home phone |  |
| Name |  |
| Day phone |  |
| Cell phone |  |
| Home phone |  |

**List and Location of Items to Grab in an Emergency** (ex: emergency kit, photos, keys.)

|  |  |
| --- | --- |
| Item | Location |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

**Other Information**

|  |  |
| --- | --- |
| Name & phone of alarm company |  |
| Gas shut off location |  |
| Fire extinguisher location(s) |  |
| Water main location |  |
| Location of emergency water |  |
| Neighbor’s water and gas shut offs |  |

**Home Information**

**General**

|  |  |
| --- | --- |
| Opening the House |  |

|  |  |
| --- | --- |
| Managing the House |  |

|  |  |
| --- | --- |
| Keys |  |

**Emergency Contacts**

|  |  |
| --- | --- |
| Emergency Contact Name |  |
| Phone |  |
| Cell |  |
| Hotel |  |

|  |  |
| --- | --- |
| Emergency Contact Name |  |
| Phone |  |
| Cell |  |
| Hotel |  |

|  |  |
| --- | --- |
| Emergency Contact Name |  |
| Phone |  |
| Cell |  |
| Hotel |  |

**Other Information**

|  |  |
| --- | --- |
| Alarm Phone |  |

|  |  |
| --- | --- |
| Gas Shut Off Location |  |
| Fire Extinguisher Location(s) |  |
| Water Main Location |  |
| Location of Emergency Water |  |

**Home Maintenance Information**

|  |  |
| --- | --- |
| Housekeeper |  |
| Phone |  |
| Cell |  |

|  |  |
| --- | --- |
| Nanny |  |
| Phone |  |
| Cell |  |

|  |  |
| --- | --- |
| Babysitter |  |
| Phone |  |
| Cell |  |

|  |  |
| --- | --- |
| Pet Care |  |
| Phone |  |
| Cell |  |

|  |  |
| --- | --- |
| Gardener |  |
| Phone |  |
| Cell |  |

|  |  |
| --- | --- |
| Handyman |  |
| Phone |  |
| Cell |  |

|  |  |
| --- | --- |
| Pool Maintenance |  |
| Phone |  |
| Cell |  |

|  |  |
| --- | --- |
| Electrician |  |
| Phone |  |
| Cell |  |

|  |  |
| --- | --- |
| Plumber |  |
| Phone |  |
| Cell |  |

|  |  |
| --- | --- |
| Heating & AC |  |
| Phone |  |
| Cell |  |

|  |  |
| --- | --- |
| Gas |  |
| Phone |  |
| Cell |  |

|  |  |
| --- | --- |
| Electric |  |
| Phone |  |
| Cell |  |

|  |  |
| --- | --- |
| Water |  |
| Phone |  |
| Cell |  |

|  |  |
| --- | --- |
| Cable |  |
| Phone |  |
| Cell |  |

|  |  |
| --- | --- |
| Trash |  |
| Phone |  |
| Cell |  |

|  |  |
| --- | --- |
| Painter |  |
| Phone |  |
| Cell |  |

|  |  |
| --- | --- |
| Carpenter |  |
| Phone |  |
| Cell |  |

|  |  |
| --- | --- |
| Pest Control |  |
| Phone |  |
| Cell |  |

|  |  |
| --- | --- |
| Home Warranty Co. |  |
| Phone |  |
| Cell |  |

|  |  |
| --- | --- |
| Computer Tech |  |
| Phone |  |
| Cell |  |

|  |  |
| --- | --- |
| Decorator |  |
| Phone |  |
| Cell |  |

|  |  |
| --- | --- |
| Doorman/Super |  |
| Phone |  |
| Cell |  |

|  |  |
| --- | --- |
| Alarm |  |
| Phone |  |
| Cell |  |

**Cleaning Services**

|  |  |
| --- | --- |
| General |  |
| Phone |  |
| Cell |  |

|  |  |
| --- | --- |
| Windows |  |
| Phone |  |
| Cell |  |

|  |  |
| --- | --- |
| Carpets /Furniture |  |
| Phone |  |
| Cell |  |

|  |  |
| --- | --- |
| Floors |  |
| Phone |  |
| Cell |  |

**Other**

|  |  |
| --- | --- |
| Other |  |
| Phone |  |
| Cell |  |

|  |  |
| --- | --- |
| Other |  |
| Phone |  |
| Cell |  |

|  |  |
| --- | --- |
| Other |  |
| Phone |  |
| Cell |  |

|  |  |
| --- | --- |
| Other |  |
| Phone |  |
| Cell |  |

|  |  |
| --- | --- |
| Other |  |
| Phone |  |
| Cell |  |

|  |  |
| --- | --- |
| Other |  |
| Phone |  |
| Cell |  |

|  |  |
| --- | --- |
| Other |  |
| Phone |  |
| Cell |  |

|  |  |
| --- | --- |
| Other |  |
| Phone |  |
| Cell |  |