



HURRICANE WATCH CENTER

Tracking Storms - Empowering Communities

PRINTABLE EMERGENCY PLAN

Family Emergency Plan – HURRICANE WATCH CENTER

Decision to Evacuate

1. Securing Your Home

- **Board Windows:** Yes / No (circle one)
- **Secure Outdoor Items** (e.g., furniture, tools): _____
- **Shut-Off Utilities Locations:**
 - **Water** _____
 - **Gas** _____
 - **Electric** _____

2. Evacuation Routes

- **Primary Route:** _____
- **Secondary Route:** _____
- **Practice Date(s):** _____

3. Shelter Locations

- **Preferred Shelter Location:** _____
- **Backup Shelter Location:** _____

4. Animal Shelter Options

- **Primary Pet Boarding or Shelter Location:** _____
- **Backup Pet Shelter Location:** _____
- **Contact Number for Animal Shelter:** _____

5. Family Communication Plan

- **Primary Meeting Point (in case of separation):** _____
- **Backup Meeting Point:** _____
- **Preferred Communication Method (Text/Call):** _____
- **Backup Communication Method:** _____

Decision to Shelter in Place

If sheltering in place is the best choice, ensure your home is secure, supplies are accessible, and utilities are ready for shut-off.

Emergency Kit Location _____

1. Shelter in Place Supplies

- Water Supply (1 gallon per person per day)
- Food Supply (non-perishable items)
- Special Needs Items
- Medications & First Aid Kit
- Battery-Powered Radio

2. Safe Room Location

- Primary Safe Room: _____
- Secondary Safe Room: _____

3. Family Communication Plan

- Primary Meeting Point: _____
- Backup Meeting Point: _____
- Preferred Communication Method: _____
- Backup Communication Method: _____

4. Staying Informed

- Local Weather Updates: _____
- Emergency Alert System: Sign up for local alerts.

In an emergency, having essential contacts and resources accessible can make a critical difference. Use the next section to compile contact info that may assist before, during, and after a disaster.

Emergency Contacts

1. Family Contacts

- **Local Contact:**

- Name: _____
- Phone Number: _____

- **Out-of-Town Contact:**

- Name: _____
- Phone Number: _____

2. Emergency Authorities

- **Local Emergency Management:**

- Phone Number: _____

- **Fire Department:**

- Phone Number: _____

- **Police Department (Non-Emergency):**

- Phone Number: _____

3. Medical Contacts

- **Primary Care Physician:**

- Name: _____
- Phone Number: _____

- **Nearest Hospital:**

- Phone Number: _____

4. Local Services and Utilities

- **Electric Company:**

- Emergency Number: _____

- **Gas Company:**

- Emergency Number: _____

Notes/Plan of Action

In this section, outline your family's specific plan of action during an emergency. Use this space to define how you want your emergency plan to unfold, assigning roles and responsibilities to each family member. Clearly stating who is responsible for what will help ensure that everyone knows their tasks and can act efficiently in a crisis. Consider including:

- **Emergency Roles:** Assign roles such as communicator, first aid responder, supply manager, and lookout.
- **Duties:** Outline specific tasks for each role, such as gathering supplies, monitoring weather updates, or securing the home.
- **Coordination:** Plan how family members will coordinate during the emergency, including check-in times and communication methods.
- **Flexibility:** Be prepared to adjust roles as the situation evolves, keeping in mind that flexibility is key to effective emergency response.

PLAN OF ACTION CONTINUED