

EMERGENCY KIT CHECKLIST

 $Your basic home \, emergency \, kit \, should \, have \, enough \, supplies \, for \, 10 \, to \, 14 \, days.$

🔋 | FOOD & WATER

- □ Water containers and/or water treatment supplies (1 gallon per person per day)
- □ Dehydrated food & energy bars; canned food (and can opener)
- □ Pots and pans, plates and cups and utensils
- □ Camping stove and fuel
- □ Lighter
- □ Fire extinguisher

- Large multi-tool; wrench or pliers (to turn off utilities)
- Dustmask(tofilter contaminated air)
- Plastic sheeting, work gloves and ducttape(*toshelter-inplace*)
- □ 1 sleeping bag or warm blanket per person
- □ Change of clothing
- Sturdy, comfortable walking shoes
- □ Warm clothing layers
- □ Rain jacket and pants

- □ Plastic tub for a home kit
- Daypack for a personal kit

🐵 FIRST AID & SANITATION

- □ First-aid kit or supplies
- Prescription meds and medical items (like glasses or contacts)
- Moist towelettes, hand sanitizer, waste bags and menstrual products
- □ Towels

□ Household liquid bleach (no colors or additives) for disinfecting (1 part bleach/9 parts water) or water treatment (16 drops in 1 gallon of water)

COMMUNICATION & LIGHTING

- Headlampand/or flashlight
- □ Whistle to signal for help
- □ Battery-powered or handcrank radio (for news and weather alerts)
- Cell phones and chargers
- □ Have a list of important phone numbers
- □ Extra batteries for all electronics

□ Copies of important

documents (Rx list, medical

history, deed/lease to home,

passports, birth certificates,

insurance policies, etc.)

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EVACUATION & DOCUMENTATION

- \Box Extra set of home and car keys
- □ Localmaps
- □ Cash (in small bills because businesses might not be able to make change)
- A copy of your communication plan (see other side)
 - KIDS, PETS & ENTERTAINMENT
- □ Food/ formula, bottles
- □ Diapers
- □ Petfood, ID, meds & supplies; extra water for your pet
- □ Paper and pencil
- Books, games, puzzles, (electronics may not work)

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WHAT MEMENTO'S/ITEMS DO I NEED TO TAKE DURING AN EVACUATION?

(jewelry, photos/albums, hard drive, sentimental/heirloom, baby books, art...)

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COMMUNICATION PLAN

Out of Town Contact:

Name:	Cell:		Landline:		
Address:		Email:	mail:		
Family Contacts:					
Name:	Cell:		Landline:		
Address:		Email:			
Name:	Cell:		Landline:		
Address:			Email:		
Name:	Cell:		Landline:		
Address:		Email:			
Name:	Cell:		Landline:		
Address:	·	Email:			
Neighborhood Meeting Place:		School/I	Daycare:		
Regional Meeting Place:	Electric Company:				
Doctor/Pediatrician Phone:		Gas Com	pany:		
Veterinarian Phone:		Water Co	ompany:		
Pharmacy and Prescription Refill #'s:			:		