

# PERSONAL DISASTER PLAN

Fill out the information in this plan and share it with your family and loved ones.

## ALL-HAZARDS DISASTER INFORMATION

Central Family Contact: \_\_\_\_\_

Doctor: \_\_\_\_\_

School(s): \_\_\_\_\_

Day Care: \_\_\_\_\_

Other Important Contacts: \_\_\_\_\_

\_\_\_\_\_

Do I have everything I need for my survival kit?  Yes  No

Have I signed up to receive *Alert Pinellas* emergency notifications?  Yes  No

Do I have a battery-powered radio for emergencies?  Yes  No

Does my family have a central meeting place if we're separated in an emergency?  Yes  No

Location of meeting place: \_\_\_\_\_

Are important papers – and copies – stored with valuables in a waterproof, safe place?  Yes  No

Originals: \_\_\_\_\_

Copies: \_\_\_\_\_

## Insurance Policy Information

Home: \_\_\_\_\_

Health: \_\_\_\_\_

Flood: \_\_\_\_\_

Auto: \_\_\_\_\_

Renters: \_\_\_\_\_

## HURRICANE PREPARATION

Evacuation Level: \_\_\_\_\_

Where we'll go if/when we need to evacuate: \_\_\_\_\_

Evacuation location, address, and phone (host home, hotel, shelter, etc.):

\_\_\_\_\_

Does my employer provide a special shelter for me and my family?  Yes  No

If Yes, list address and phone: \_\_\_\_\_

Does my evacuation location allow pets?  Yes  No

My pet(s) name/type of pet(s): \_\_\_\_\_

What will I do with my pet(s) if I evacuate?

\_\_\_\_\_

If required, have I registered for Special Needs Evacuation Assistance?  Yes  No

Can I be a host home?  Yes  No

If yes, how many/who will I host?

\_\_\_\_\_

\_\_\_\_\_

What preventative measures will I take to safeguard my home?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are my windows and doors protected?  Yes  No

Where is my safe room? \_\_\_\_\_

How will I secure my boat? \_\_\_\_\_