

Emergency Evacuation Plan

General Information

Building Address		
Building Owner/Occupant		
Contact Information		
Building Use		
Potential Emergencies & Hazards Checklist (Check all that apply)		
<input type="checkbox"/> Fire	<input type="checkbox"/> Gas Leak	<input type="checkbox"/> Power Outage
<input type="checkbox"/> Flood	<input type="checkbox"/> Hazardous Spill	<input type="checkbox"/> Earthquake
Other Notes: _____		

Evacuation Procedures

Primary Evacuation Route	
Secondary Evacuation Route	
Emergency Exits	
Fire Alarm Pull Locations	
Assembly Points	

Utility Company Emergency Contacts

Electric	Phone: _____
Gas	Phone: _____
Water	Phone: _____

Resources & Equipment Locations

First Aid Kits	
Fire Extinguishers	
Personal Protective Equipment	
Generators	

Emergency Personnel

Emergency Coordinator	Name: _____ Phone: _____
Evacuation Personnel Counter	Name: _____ Phone: _____
Assistants to Phys. Challenged	Name: _____ Phone: _____

Emergency Phone Numbers

Building Manager	Name: _____ Phone: _____
Fire Department	Name: _____ Phone: _____
Paramedics	Name: _____ Phone: _____
Ambulance	Name: _____ Phone: _____
Police	Name: _____ Phone: _____

Other Notes: _____
