

Developing Your PREP Plan

Think Ahead. Get Informed.

Emergencies can affect everyone. If you plan ahead, you and your family can be prepared for any type of emergency. If you have special needs, you may need extra preparation.

This **PREP Plan** will help you to be ready in the event of an emergency. You can't know when or where an emergency will happen, but you can make a plan and be better prepared.

During an emergency, you won't have time to shop or to search for supplies. You should be prepared to meet your own basic needs for at least **72 hours** after an event. That's why you need a **PREP Plan** with all the information and supplies you need – whether you are able to stay at home or need to evacuate and relocate.



My PREP Plan

Household Member Information

Each member of your household should be entered into your emergency plan. Start by creating an entry for yourself, and then add an additional one for each member of your household.

Household Member Name	Relationship	Home/Cell/Work Phone Number

Address Information

Enter your primary address and phone number, as well as any alternate address and phone number for contact in an emergency.

	Street Address, City, State, Zip	Phone Numbers
Primary Address		
Secondary Address		

Out of Town Contacts

In an emergency, you may be separated from other members of your household. Include the names and contact information for family and friends in other areas whom you will contact to let others know you are safe.

Name	Relationship	Home/Cell/Work Phone	Email Address

Meeting Place Information

It is important to have a place to meet if family members are separated and cannot go home. You should choose a public and safe place that you all know. List a second place in case the first is unavailable.

Name of Meeting Place	Address, City, State, Zip	Phone
1 st Meeting Place		
2 nd Meeting Place		

Circle of Support

It is important to identify your circle of support – neighbors, relatives, friends, and coworkers who can be helpful to you in an emergency. Discuss your needs with them and let them know that you have included them in your plan. List their contact information and how they will help you.

Name of Support Person	Street Address, City, State, Zip	Home/Cell/Work Phone	How they will help you

Shelter Information

The Red Cross and other volunteer organizations help set up community shelters when emergencies occur. Find the location of your local Red Cross chapter here: http://www.redcross.org/.

Put the phone number of your local Red Cross chapter in the section below so that you will know where to call for information in an emergency.

	Name	Phone Number
Local Red Cross Chapter		

Transportation Options

If you are likely to require assistance with transportation in the event of an emergency, list the names and contact information of people or transportation services you can call. Transportation type may include paratransit, van with lift, medical transport, etc.

	Name	Phone Number	Transportation Type
Transportation Option # 1			
Transportation Option # 2			

Household Member Medications

It is a good idea to keep a record of household members' medications. Talk with your doctor or pharmacist about how to be sure you have at least a three-day supply of your medications. Be sure to update this information when your medications change.

Household Member Name	Medication Name	Dosage and Frequency	Prescription Number	Pharmacy Name and Phone Number

Allergy Information

It is a good idea to keep a record of household members' allergies (environmental, chemical, food, medication, any other sensitivity).

Household Member Name	Allergy/Sensitivity

Household Member Medical Supplies

If anyone in your household uses durable medical equipment or supplies, or assistive technology devices, it is a good idea to keep a record of these. Examples include eyeglasses, wheelchair, walker, oxygen, or communication board.

Household Member Name	Item Name	Supplier Name	Supplier Phone Number

Insurance Information

List your insurance policies and contact information for health, auto, home, and other forms of insurance.

Name of Insurance Company	Policy Type	Insurance Company Contact	Phone Number	Policy Number	Other Information

Additional Useful Contacts

Contact information for your doctor, dentist, utilities provider and other organizations is valuable to have on hand in case of an emergency. Contacts could include: doctor, dentist, hospital, gas/water/power company, veterinarian, etc.

Type of Contact	Contact Name/Organization	Address, City, State, Zip	Phone

Other Information List other important information or medical history about any member of the household that would be useful for emergency responders (such as medical diagnosis, mental health condition, communication needs, or mobility issues).						

Pet/Service Animal Information

Pet owners should prepare a supply kit that includes enough pet food and water for three days, pet medications and medical records, leashes, ID tags, and other appropriate supplies.

Pet Name	Dietary Needs	Service Permit/Vaccination Records	Other Information

Emergency Supply Kit

Your family should have an emergency supply kit on hand at all times. Be sure and include the following items:

General Supplies	Pet & Service Animal Emergency Supply Kit	
\square Water– at least 1 gallon daily per person for at least 3 days	☐ Medications	
☐ Food– at least enough for 3 days	\square Leashes and/or carriers to transport pets safely	
\square non-perishable packaged or canned food , juices	\square Food, water	
☐ non-electric can opener	☐ Pet ID tag, vaccines, certifications	
☐ First aid kit, medicines		
☐ Toiletries	Additional Supply Kit Items if Time Permits Before an	
☐ Flashlights, batteries	Emergency	
☐ Battery-operated chargers	☐ Food: non-perishable packaged or canned juices snack foods	
☐ Radio – battery-operated and NOAA weather radio		
☐ Traditional (not cordless) land line telephone	cooking tools, fuel	
\square Cash (with some small bills) and credit cards	paper plates, plastic utensils	
☐ Extra set of keys	☐ Blankets, pillows	
☐ Important documents in a waterproof container or	☐ Clothing: seasonal, rain gear, coat if necessary	
watertight resealable plastic bag, including PREP Plan,	☐ Special items for infants	
insurance, medical records, bank account numbers,	☐ Toys, books, games	
Social Security card	☐ Basic tools	
	□ Vehicle fuel tanks filled	

Review and Update!

Review your **PREP Plan** with all family members on a regular basis. Communicate about your plan with babysitters, neighbors, friends, employers, and school personnel. Make sure each member knows what his or her responsibilities are in the event of an emergency. Provide copies as needed.

Plan Review

Date	Comments

Resources to Help You Plan

FEMA – www.fema.gov Red Cross – www.redcross.org National Organization on Disability – www.nod.org Ready.gov – www.ready.gov