

## Disaster Planning Checklist

**Preface:** This form is based largely on the efforts done by Ron and Kathy Fisher, Emergency Preparedness Specialists (EPS's) of the Desert Hills Ward, Richland Washington Stake of the Church of Jesus Christ of Latter-day Saints (LDS). They have given seminars on "Ward Networks" with a similar form they used to gather data for their area based on past experiences. They can be reached at 509-967-3253 or email at ron\_fisher@hp.com for further information. Compiling this information into a usable form in emergency situations is under the jurisdiction of local Bishops in each LDS Ward and by those called to be EPS's. This information is to be treated in a "confidential" manner by the Bishops and designated EPS's and is not to be sold or used for marketing purposes.

# Disaster Planning Checklist

## Contact Information

Today's Date:

Point of Contact Name:

Address:

Home Phone:

Email:

Business Phones:

Number in family; Female Male Age

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.

## Self-sufficiency

1) In the event of an emergency, does anyone in your family have health concerns or special needs?

Name(s);

Concerns;

If you need help, what kind?

2) In your opinion, is your home "at risk" for;            High      Possible      Probably Not

Flooding

Wind damage

Falling trees

Falling power lines

Wild fire

Other

3) Do you have "alternative" heating?

Fireplace

Propane Stove

Wood Stove (style)

Supply of propane or kerosene (white gas)

Supply of wood

Other

4) Do you have "alternative" power?

Generators

Solar

Other

5) Do you have; Yes No

“Bug-out” kit or  
“72-hour” kit for each family member?

Backpack with current clothes/bedding/  
personal items per person?

Home fire escape plan?

Home disaster evacuation plan?

Work/School disaster evacuation plan?

6) Do you have food and water storage;

Week?

Month?

3 month?

6 month?

1 year?

7) In the event of a personal or area disaster, do you have family that you can temporarily live with?

Yes Maybe Location No

8) Do you know the names of your 4 nearest neighbors?

Contact information:

1.

2.

3.

4.



**Alternative housing**

Apartment/Rental(s)

Camper

Motor Home

Trailer

Tarp(s)

Tent(s)

Other

**Bedding**

Air mattress(s)

Blanket(s)

Pillow(s)

Other

**Communications**

Base station

Cell Phone Number (emergency use only - do not distribute without permission!)

email address

Shortwave or Ham radio

Two-way radio(s)

Other

**Land Vehicles**

Automobile

Pickup

Truck

Utility Trailer

Van

Other

**Water Vehicles**

Boat

Canoe

Jet Ski (2 or 3 person)

Raft

Other

**Tools**

“Shop” tools

Axe

Chainsaw

Cutting tools

Emergency lighting

Fans

Garage

Portable Generator (with fuel)

Other

17) Feedback items: Did we miss anything?

18) Does your family wish to receive further “Family Preparedness” information or training? If so, what kind?