**Pre-Evacuation Contact**

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| Name of Person Contacted: |  |
| Address or Location of Contact: |  |
| Number of persons at this location: | Adults | Minors |
| Males | Females | Males | Females |
|  |  |  |  |
| Transportation Available | Yes | No |
| Pets/Animals needing attention | Yes | No |
| Special Needs or Assistance Required: (explain) |
| Phone Number at contact location |  |
| Emergency Contact Name |  |
| Emergency Contact Number |  |
| Electronic media most often on at contact location | Television | Radio | None |
| Other information: |  |
| Contact Made By: |  |