



Appendix 15-A Emergency Plan Guideline/Checklist

A. General Information:

1. Describe work activity conducted at this location: _____

2. Describe the management levels which exist at the facility / jobsite and name the individuals who hold those positions: _____

3. List the supervisor(s) / employees working regularly at this site who are trained in First Aid / CPR: _____

4. Natural disasters this geographic area is prone to:
Floods: _____ Tornadoes: _____
Hurricanes: _____ Earthquakes: _____
5. Number of levels this facility has where work is performed: _____

B. Work Environment:

1. List the heavy labor jobs at this facility. _____

2. Detail the hazardous materials used at this facility. (This includes chemicals, fuels, etc.):

4. Does this site emit any types of gases or exhaust into the air? _____

5. Does this site store large quantities of flammable materials? If so, what types?

6. What types of emergency incidents have occurred since this facility began operations?

C. Fire Protection:

1. What type of fire alarm system does the facility have or is available to use? How is it activated? Is the fire department automatically notified? _____



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2. How are people in the facility / site made aware of a fire or other emergency? _____

3. Does the facility have smoke detectors or an automatic sprinkler system? _____
Is it operational? _____ please describe: _____

4. What flammable / combustible materials are being stored on the premises and where? _____

5. Are an adequate # and type of fire extinguishers available? _____ Are they
inspected both monthly internally and annually by a vendor? _____ Are extra
extinguishers needed to perform welding or other hot work operations? _____
6. Are there people designated for extinguishing fires? _____
7. Have these people received the necessary training? _____
8. Describe the housekeeping and storage arrangements? _____

9. Are there procedures for evacuating employees / guests? _____
10. List the possible ignition sources? _____

11. What phone numbers need to be called in the event of a fire?

12. Are these numbers posted in key areas? _____

D. Bomb Threat:

1. Who is designated to assist police, arson, or bomb squad(s) with a search? _____
2. Who will document the caller information? _____

E. Loss of Utilities:

1. What types of utilities are utilized by this facility? _____

2. Which companies supply these utilities (emergency #'s)? _____



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3. Does a loss of any particular utility pose a hazard to the environment? _____

4. Are there back-up systems in place for temporary utilities, and if so, how do they work? _____

F. Community Response Services:

1. What telephone number(s) will be called in the event of a health emergency? _____

2. Where are the closest medical facilities? _____

3. Who will act as our contact with those facilities? _____

4. Where is the closest Trauma Center? _____

5. What is the telephone number of the local police department? _____

6. Does the town or city have a HAZMAT team? _____

7. Who are the media sources in the area? _____

8. Who is designated from the company to respond to media questions? _____

Comments/Notes:

Facility / Project Manager Signature

Date