

# Our household EMERGENCY PLAN

**PLAN**



Make an  
emergency plan

**PACK**



Pack an  
emergency kit

**LISTEN**



Stay  
informed

## HOUSEHOLD MEMBERS:

Name: .....

Phone:.....

Name: .....

Phone:.....

Name: .....

Phone:.....

Name: .....

Phone:.....

Name: .....

Phone:.....

## HAZARD ZONES:

(Storm tide, flood, bushfire, hillslope)

.....  
.....  
.....  
.....

## WHERE WE WILL GO IF LEAVING:

(Family, friends, neighbours)

Name: .....

Address:.....

Phone:.....

## HOW WE WILL GET THERE:

.....  
.....  
.....  
.....

## EMERGENCY MEETING PLACE:

.....  
.....

## OUR EMERGENCY KIT IS LOCATED:

.....

## ESSENTIAL MEDICATIONS:

.....

## PETS:

Names:.....

Registration nos. ....

## INSURANCE DETAILS:

Home insurer:.....

Policy no. .... Phone: .....

Contents insurer: .....

Policy no. .... Phone: .....

Car insurer: .....

Policy no. ....Phone: .....

## EMERGENCY CONTACT NUMBERS:

Police/fire/ambulance 000

SES 132 500

Local Disaster Coordination Centre 4044 3377

Ergon 13 2296

Main Roads 13 1940

Doctor: .....

School: .....

Childcare: .....

Workplace: .....

.....

Friends: .....

.....

Neighbours: .....

.....

.....

Vet: .....

Other: .....

.....



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