RESIDENTIAL EMERGENCY INFORMATION FORM

The Village's Emergency Services are always looking for better ways to serve the residents of our community. One of the ways we do this is to gather information before an emergency exists. The Fire Department conducts this type of pre-fire planning for the Commercial properties in the Village. This form is an effort to do pre-emergency planning for Residential properties.

We are asking Village residents to complete this form as thoroughly as possible so that the EMS, Fire Department and Police Department may serve you better in the event of an emergency. The information gathered will be kept confidential and only utilized during an emergency situation. If you chose not to participate in this pre-planning project, we respect that decision. Please return the form to: ***Shorewood Hills Fire Department at 810 Shorewood Boulevard, Madison WI 53705-2115***. If you have any questions, please contact the Fire Department at 267-2680.

Property Address:	Owner's Name(s):	Phone #:

Do you have smoke alarms in your residence? Yes No Are they battery powered? □ or hard wired? □
If the smoke detectors are hard wired, is your alarm system monitored by an alarm company? Yes No
If yes, name of company / phone #

If your alarm system is monitored by an alarm company, do you have security protection as well? Yes No

Who would you like us to contact in the event of an emergency (i.e. relative, neighbor, your work #, etc.)?

1) Contact's Name: Relation: Phone #:

2) Contact's Name: Relation: Phone #:

3) Contact's Name: Relation: Phone #:

** We will accept less than three or as many contacts as you like, please write additional contact information on a separate sheet of paper*

Do you have a key to your residence on file at the Fire Station? Yes No
If yes, may this key be used in the event of an emergency? Yes No

Please be as descriptive as possible with the following utility shut off locations:

Circuit breaker box location: _____

_____

Gas meter location: _____

_____

Water meter location: _____

_____

Are there any disabled or infirmed people living in the residence? Yes No If yes, please describe the situation below:

Are there any children living in the residence? Yes No If yes, please list their name and year of birth below:

Does your family have an escape plan in the event of a fire in your home? Yes No If yes, where is your designated meeting point outside the house (i.e. neighbor's home, large oak tree across the street, etc.)?

List any other information that you feel would be relevant to personnel responding to your home in the event of an emergency:

□ This is the first time our family has completed the Residential Information Form

□ This is revised information for a previously submitted Residential Information form