


# NEIGHBORHOOD CONTACTS

MAP YOUR NEIGHBORHOOD (MYN)

<b>Address:</b>	
<b>Name1</b>	<b>Name2</b>
<b>Landline Phone</b>	<b>Landline Phone</b>
<b>Cell Phone</b>	<b>Cell Phone</b>
<b>Email</b>	<b>Email</b>
<b>Any specific needs?</b> (e.g. meds)	<b>Any specific needs?</b> (e.g. meds)
<b>Can you manually open your garage door?</b>	<b>Can you manually open your garage door?</b>
<b>Special Knowledge &amp; Skills?</b> (medical, communications, trades, etc)	<b>Special Knowledge &amp; Skills?</b> (medical, communications, trades, etc)

<b>Utility Shut-off Locations</b> (left, right, front, side facing house)	Write in Utility letter in actual location	<div style="text-align: right;"> <span style="color: red;">G = Gas</span>  <span style="color: green;">E = Electric Panel</span>  <span style="color: blue;">W = Water turnoff</span>            C = Brick Chimney         </div>
Gas: _____ Electrical: _____ Water: _____		
<b>Do you have a Shut-off Wrench at Gas Meter?</b> Yes _____ No _____		

<b>Do you have any special equipment?</b> (generator, chain saw, pry bar, other)
<b>Do you have Specific Fire Dangers? List Locations.</b> (wood shingle roof, stored toxic/flammables)

<b>Pets? Names &amp; Descriptions</b>

Emergency Contacts	Name	Phone	Relationship

<b>Any other essential info?</b> Meds, Medical devices, Conditions, etc.