## Newton County Emergency Management Residential Storm Shelter Registry

Name:					
Address:					
Phone:					
Alternate Phone:					
Capacity: # People					
Type of Shelter:	<ul> <li>□ In-Ground</li> <li>□ Basement</li> <li>□ Safe Room</li> <li>□ Crawl Space</li> <li>□ Other</li> </ul>	Special Considerations:	□ Invalid: Disa □ Animal: Poss animal present □ Security: Loc responders may □ Other:	ible vicious dog	g or other her items
Location of Shelter:					
Out of Town or Other Contact: Include name and phone #					
Other address or location you might be at during or after a storm:					
Name of your responding fire department:	(If not known, we will coordinate by address of shelter)				
Other Information:					

This information will be maintained by Emergency Management personnel and used only in the event of structural damage from severe weather or other related incidents in your area.