

FARM / FACILITY EMERGENCY PRE-PLAN INFORMATION

Complete one form for each equine facility building (arena, barn, feed storage, etc.) on the premises where animals have access to, are adjacent to, or are confined -- Recommended bi-annual revision / updates be completed and presented to local fire/rescue service

Date Completed: _____

General Information

Location Name: _____

Address: _____ City/State/Zip: _____

GPS Coordinates: X - _____ Y- _____

Owner/Responsible Party Information

Property Owner Name: _____ Contact #: _____

If different than above

Responsible Party (Owner, Tenant, Agent, etc.) Name: _____

Affiliation to Property: _____ Contact #: _____

Emergency Contact Information (at least one local contact)

Name: _____ City/State: _____ Contact #s: _____

Name: _____ City/State: _____ Contact #s: _____

Veterinarian Information (for emergency animal care)

Clinic Name: _____

Contact #s: _____

Veterinarian Name: _____

Address: _____ City/State/Zip: _____

Clinic Name: _____

Contact #s: _____

Veterinarian Name: _____

Address: _____ City/State/Zip: _____

Building Information

Building Identification (Name, Number or Description): _____

Directions / Access to Building from main roadway: _____

Alternate Directions / Access to Building: _____

Year of Original Construction: _____ Year of Last Remodel (if applicable): _____

Number of Floors/Stories: _____ Number of Stalls/Pens: _____ Number of Rooms: _____

Approximate Dimensions of Building: _____ Length _____ Width _____ Height

Construction Type (concrete, wood, steel, etc.): _____

Roof Construction Type (wood, tin, shingle, etc.): _____

Is there a permanent or temporary human living area in or attached to the building? _____

Average Human Occupancy: _____ Daytime _____ Nighttime

_____ Human residents in or adjacent to building _____ Number of disabled human occupants

Types of animals in building (other than equine species): _____

Average number of animals in or near the building on daily basis: _____

Average number of animals inside building during daytime hours: _____ ...during nighttime hours: _____

Access points for ingress and egress: _____

Key Location (if applicable): _____

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Types of hazardous materials inside or around building (*propane cylinders, batteries, fuels, chemicals, fertilizers, etc.*):

Hazardous Materials Placard Location (*if applicable*): _____

Are hay, fuel, bedding or other combustibles stored inside the building? _____

If yes, what type and where? _____

If no, are any of those items stored in close proximity to the building and how far from the building? _____

Fire Alert: Alarms present? _____ Type (*Smoke, Heat, etc.*)? _____

If yes, is it monitored by company for automatic dispatch? _____

Fire Suppression: Suppression System present? _____

Type (*Sprinkler, Gas, Powder, etc.*)? _____

If yes, how is it supplied? _____

Property Information

Directions to most accessible point for vehicle entry (*consider road/driveway width and turning radius of entering vehicles, overhead clearance, and space to turn around or exit*): _____

Special instructions for entrance to the property (*gate code, key location, Knox Box, keyholder, etc.*): _____

Areas to secure animals once evacuated from incident area (*pastures, paddocks, corrals, etc. - animals are not guaranteed to be separated in an emergency*): _____

Available and accessible water drafting areas (*points where the fire department could get water if no fire hydrant nearby - pools, creeks, ponds, cisterns, etc.*): _____

Utility Information

Power Information:

Type of Power (*Electric, Solar, etc.*): _____

Name of Company: _____ Contact #: _____

Location of Meter/Shut Off: _____

Fuel Information:

Type of Fuel (*Natural Gas, Propane, etc.*): _____

Name of Company: _____ Contact #: _____

Location of Meter/Shut Off: _____

Water:

Type of Water (*Well, City/County, etc.*): _____

Name of Company: _____ Contact #: _____

Location of Meter/Shut Off: _____