

EMERGENCY / DISASTER
BOOKLET

PLEASE PLACE ON TOP OF
REFRIGERATOR
PLEASE KEEP UPDATED

Please leave on refrigerator or kitchen counter
if you move –
Remove your personal information

EMERGENCY/DISASTER

Do the following when applicable

1. Assess your own safety, health, and well-being. Take care of any immediate needs.
2. Assess the safety, health, and well-being of those living with you. Those who are at home first, then those who are not at home. Finding information about those who are away, may not be possible, be wise, do not waste valuable time here. You may need to trust their care to others for a time. Take care of any immediate needs.
3. Assess your dwelling safety and livability. If your dwelling is not safe, grab your 72-hour pack and leave. Do you need to shut off electricity, gas, or water? (See Quick Reference Guide).
4. Display your colored door hanger or placard where it is visible.
5. Report your situation to your out-of-state contact and your block captain.
6. Block and assistant Block Captains: please check on and document the status and needs in your block. Address/Report immediate needs.
7. Check on neighbors and others you care for or minister to. Address/Report immediate needs.
8. Assess and list your priorities and the needs of others.
Medical, water, shelter, clothing, bedding, food... for the coming hours, days, weeks...

Dear Friend and Neighbor,

This folder is provided to help you plan and prepare for disaster and emergency situations. Making a plan and being prepared will help minimize the impact of an emergency or disaster.

IF DISASTER STRIKES PLEASE DISPLAY YOUR COLORED DOOR HANGER QUICKLY:

Green: All is well!

Red: We need help or critical care!

This helps Block Captains and Emergency Personnel quickly access the needs in their area.

PLEASE TAKE THE TIME TO BECOME FAMILIAR WITH THE INFORMATION ON THE “KAYSVILLE SOUTH FAMILY EMERGENCY RESPONSE REFERENCE GUIDE”

It is a great source to help you plan and reference if disaster strikes. Additional information can be found at ksspreparedness.org and bereadyutah.gov.

PLEASE complete the “Family Emergency/Health Information” and “Contacts” sheets and keep with this folder. This will be invaluable to you and emergency workers in the event there is a disaster.

PLEASE complete Form 2 and return it to your Block Captain.

Block Captain _____

Text _____

Email _____

Assistant Block Captain _____

Text _____

Email _____

Then be prepared by having a plan, gaining knowledge, skills, and resources. See below for suggestions:

Safe Drinking Water

- Minimum storage 1 gallon per day per person for at least 2 weeks
- Water sources and purification

Grab and Go Pack

Food Storage

Shelter in Place

Car Survival Kit

Power Outages

High Winds

Heating, Cooling and Lighting

Fire

Earthquake

Floods

Chemical Spills

Pandemic/Flu

Special Needs: Infants, Young Children and Elderly

First-Aid Kit

Family Emergency/Health Information Sheet

(Have available in folder for Emergency Access)

Family Name: _____

Street Address: _____

City, State, ZIP: _____

Home Phone 1: _____

Home Phone 2: _____

Cell Phone 1: _____

Cell Phone 2: _____

Cell Phone 3: _____

Emergency Care Authorization

I hereby authorize the following individuals to make medical decisions on behalf of my family if I am unavailable in the event of an emergency.

Name _____

Phone _____ Relation: _____

Name _____

Phone _____ Relation: _____

Name _____

Phone _____ Relation: _____

Signed _____

Preferred Hospital: _____

Health Plan: _____

Group Number: _____

Family Member

Name: _____

Birth Date: _____ Employer or School: _____

Age: _____

Height: _____ Contact: _____

Weight: _____ Phone: _____

Hair Color: _____ Physician: _____

Sex: _____ Phone: _____

Blood Type _____

Medications: _____

Special Medical Conditions: _____

Family Member

Name: _____	
Birth Date: _____	Employer or School: _____
Age: _____	_____
Height: _____	Contact: _____
Weight: _____	Phone: _____
Hair Color: _____	Physician: _____
Sex: _____	Phone: _____
Blood Type _____	

Medications: _____

Special Medical Conditions: _____

Family Member

Name: _____	
Birth Date: _____	Employer or School: _____
Age: _____	_____
Height: _____	Contact: _____
Weight: _____	Phone: _____
Hair Color: _____	Physician: _____
Sex: _____	Phone: _____
Blood Type _____	

Medications: _____

Special Medical Conditions: _____

Family Member

Name: _____	
Birth Date: _____	Employer or School: _____
Age: _____	_____
Height: _____	Contact: _____
Weight: _____	Phone: _____
Hair Color: _____	Physician: _____
Sex: _____	Phone: _____
Blood Type _____	

Medications: _____

Special Medical Conditions: _____

Family Member

Name: _____	
Birth Date: _____	Employer or School: _____
Age: _____	_____
Height: _____	Contact: _____
Weight: _____	Phone: _____
Hair Color: _____	Physician: _____
Sex: _____	Phone: _____
Blood Type _____	

Medications: _____

Special Medical Conditions: _____

Contacts (Have available in folder for Emergency Access)

****List at least one out of town contact****

Extended Family:

Name: _____

Phone: _____

Relation: _____

Name: _____

Phone: _____

Relation: _____

Name: _____

Phone: _____

Relation: _____

Friends:

Name: _____

Phone: _____

Name: _____

Phone: _____

Name: _____

Phone: _____

Child Care/Safety

In the event of an emergency where my children need a place to go and stay, care will be provided for them by the following:

Name: _____

Phone: _____

Name: _____

Phone: _____

Additional information can be found in the Family Emergency Preparedness Handbook at ksspreparedness.org.

COMMUNITY EMERGENCY NEEDS AND RESOURCE ASSESSMENT

NAME: _____ PHONE: _____ DATE: _____

CELL PHONES: _____

ADDRESS: _____

EMAIL ADDRESSES: _____

Number currently residing at residence _____ Do you own a 2-way radio? ___ yes ___ no

Have you filled in the Family Emergency/Health Information and Contacts sheets? ___yes ___no

Are you willing to house another family in an emergency? ___ yes ___ no

List any special needs or conditions any member of your household may have during an emergency (oxygen, wheelchair, blind, deaf, life supporting medications, insulin, etc)

Name	Special Needs

During an emergency, check which **ITEMS** you would be willing to share:

- | | | |
|----------------------------------|------------------------|------------------------------|
| ___ Wet/Dry Vacs | ___ Generator | ___ Ham Radio |
| ___ Sump Pump | ___ Chain Saw | ___ Alternate Heat Source |
| ___ Snow Blower | ___ Extended Ladder | ___ Alternate Lighting |
| ___ Carpentry Tools | ___ Tractor | ___ Alternate Stove |
| ___ Plumbing Tools | ___ Heavy Duty Truck | ___ Alternate Fuels |
| ___ Electrical Tools | ___ Winch | ___ Dutch Ovens, Cooking Pot |
| ___ Cutting/Welding Equipment | ___ Large Electric Fan | ___ Medical Supplies/Equip |
| ___ Extra Tents or Sleeping Bags | ___ Utility Trailer | ___ LAN Line Phone |

During an emergency, designate what **SKILLS** you would be willing to provide:

- | | | |
|------------------------------|-----------------------------|------------------------------|
| ___ Child Care Skills | ___ Military Experience | ___ CERT Trained |
| ___ Building Contractor | ___ Law Enforcement | ___ Physician |
| ___ Plumbing Inspector | ___ Restaurant Skills | ___ Nurse |
| ___ Plumbing Skills | ___ Mass Feeding Experience | ___ E.M.T. |
| ___ Electrical Skills | ___ Auto Mechanic | ___ First-Aid Training |
| ___ Carpentry Skills | ___ Financial Counseling | ___ Health Care Experience |
| ___ Heavy Equipment Operator | ___ Insurance Expertise | ___ Ham Radio Skills |
| ___ Sanitation Experience | ___ Computer Skills | ___ Mental Health Experience |

Kaysville South East Area Family Emergency Response Quick Reference Guide

Website - ksspreparedness.org – September 5, 2021

EMERGENCY PHONE NUMBERS

EMERGENCY ONLY..... 911
KAYSVILLE & FRUIT HEIGHTS CITIES
Fire..... 801-544-2860
Kaysville Police 801-546-1131
or 801-544-0511
Fruit heights Police..... 801-451-4100
Farmington Highway Patrol..... 801-447-8120
FBI..... 801-579-1400

LOCAL HOSPITALS

Davis 801-807-1000
Intermountain Layton 801-543-6000
Lakeview 801-299-2200
McKay Dee..... 801-387-2800
Ogden Regional 801-479-2111

POISON CONTROL..... 800-222-1222
or 801-825-4357

RAPE CRISIS CENTER..... 801-392-7273

SAFE HARBOR DV SHELTER.....801-444-3191
or 801-444-9161(crisis)

SUICIDE PREVENTION / CRISIS...801-773-7060
or 800-273-8255

PUBLIC UTILITIES

Kaysville Electric..... 801-544-8925
or 801-299-7735 (after hours)
Kaysville Public Works / Water .801-544-8112
or 801-299-7733 (after hours)
Haight's Creek Irrigation 801-546-4242
Central Davis Sewer District.... 801-451-2190
Old Dominion (Questar) Gas.... 800-323-5517
or 800-767-1689 (emergency)
Rocky Mountain Power 888-221-7070
or 1-877-508-5088 (outage)

OTHER IMPORTANT NUMBERS

Davis County Health Dept..... 801-525-5000
Domestic Violence Info..... 800-897-5465
Utah Red Cross..... 801-323-7000
Davis School District..... 801-402-5261
Davis County Animal Control.... 801-444-2200

Bus, FrontRunner, TRAX..... 801-743-3882
Weather Information..... 801-524-5133
Statewide Road Conditions 511 or 866-511-8824

FAMILY EMERGENCY RESPONSE

1. Save your own life and that of your family first. Families should stay together during initial phase of disaster. Provide first aid to your family if necessary.
2. Report your family's status to your out-of-state contact within 10 minutes.
3. Report your condition or request critical help through your Block Captain.
4. Post family condition on front door before evacuating the home. (Use door hangar, paper, ribbons, clothing, etc...):
Green – "All is well."
Red – "We need help or critical care required."
5. After their own families are safe and secure, block captains can check on assigned families.
6. Check on status of immediate neighbors and help post status colors.
7. If your area is required to evacuate, make sure all living household members evacuate together with neighborhood members of your block and possibly, area. If the situation becomes dangerous waiting for neighbors who do not report, leave without them, but leave a note where you are going.
8. If you are asked to "Shelter in Place," stay in your home for the length of time the local authorities deem it is necessary.

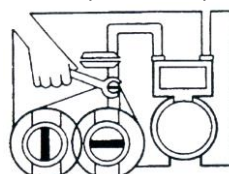
UTILITIES SHUT-OFF AND LOCATION

In case of fire, earthquake, or other emergency, turning off your utilities can prevent unnecessary danger or damage.

Shut utilities off in the following order:

Attach appropriate wrench to gas meter and let it stay there for emergency use.

Gas: Only turn off if you smell gas anywhere.



Gas Valve

ON OFF

To avoid the danger of an explosion following the onset of a fire or after an earthquake, turn this utility off first.

• The shut off valve is usually located outside your home next to the meter.

Our location is _____

• Do not light a fire or use your telephone, light switches, or electrical or battery-operated equipment. Turn flashlights on before entering an area containing gas-fed equipment.

• Ventilate your home by opening windows and doors.

• Evacuate all persons from your home.

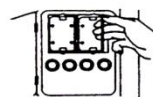
• Call from a neighbor's home for assistance unless a general disaster has occurred.

• Gas can only be turned back on by someone from the gas company or a licensed professional. Do not attempt to turn the gas on yourself.

Electricity:



Circuit Breaker



Pull-out Cartridge Fuses

Because of possible damage to electrical wiring found your home, turn this utility off next in one of two places.

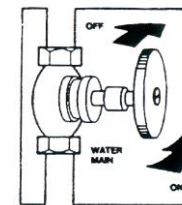
• **Fuse or circuit box.** This box is usually located in the hallway, garage, or basement of your home. To shut off all the power, pullout all the fuses or "trip" all the circuit breakers.

• **Meter box.** To turn off the power, use the switch on the electric meter below the glass bubble. The meter maybe mounted on an outside wall or on a utility pole found on your property.

• Our location is _____

To avoid damage, turn off circuits except to lights. Turn on other circuits after lights are steady for a few minutes.

Water:



In order to prevent contamination of your water supply, turn this utility off as soon as possible in one of two places.

• **Home Shutoff Valve.** This valve is usually located in your basement where the water feed enters your home. You may need pliers to turn it off. (Check now to see if it is loose.) If the house must be evacuated without heat during freezing weather, turn off the water and drain water lines by opening all water faucets and the water heater drain valve. Make sure to refill the water heater before turning on gas pilot.

• **Outside Meter and Valve Box.** This valve is usually located between the curb and the sidewalk. It is harder to get to and will probably need a wrench.

Our location is _____

FAMILY PREPARATION CHECKLIST

- Create family emergency response plan including fire escape plan
- Family meeting regarding your response plan and other emergency preparedness topics
- 72-hour kit(s) (update yearly)
- Family first aid kit (update 6 months)
- Water storage – 2-week supply
- Basic food storage
- Commodity storage
- Fuel, cooking, and light storage
- Contingency cash fund in place
- Emergency supplies locator
- Valuable documents consolidated (update yearly)
- Shelter-in-place kit assembled
- Install smoke and CO2 detectors (change batteries yearly)
- Fire extinguisher(s) home and auto (update yearly)
- Automobile emergency kit (update 6 months)
- Fill out the Family Emergency Information and Contact Sheet (see ksspreparedness.org)

FAMILY RESPONSE PLAN

1. Talk with your family about why you need to prepare for a potential disaster. Discuss what you might do with each type of disaster that could take place. Every 6-12 months, discuss and update your plan.
2. Pick two safe places to meet immediately following a disaster:
 - a. Immediately outside your home during a sudden emergency (in-home fire).
 - b. Outside your neighborhood in case you cannot return home. Each family member must know the address and phone number.
3. Choose an out-of-state friend to be your family contact. After a disaster, it is often easier to call long distance, and most phone service is active for 10 minutes. If family members are separated during an emergency, they should call this person and tell them

where they are. Everyone must know the contact phone number.

4. Address special needs, i.e. disabled, elderly, pets, etc.
5. Teach children how and when to call 911 for emergency help.
6. Determine the best escape routes from your home. Find two ways out of each room.
7. Find the safe spots in your home for each type of disaster, especially an earthquake.
8. Instruct each family member how and when to turn off the water, gas, and electricity at the main switches.
9. Teach all family members how to use the fire extinguisher (ABC type), and show them where it is kept.
10. Install smoke detectors on each level of your home, especially near bedrooms.
11. Install CO2 detectors within 40 feet of all rooms used for sleeping. Install a detector near your gas furnace; follow manufacturer's installation instructions.

FAMILY 72 HOUR EMERGENCY KITS

Each family should adapt the list for its own special needs. The emergency preparedness kit should be kept cool, dry, and readily accessible. It could be stored in backpacks, duffle bags, suitcases, or 5-gallon buckets. Refer to the website (ksspreparedness.org) for a suggested 72-hour Kit. This family emergency kit should include the following as a minimum:

Water – 1 gallon per person per day

Food – 3 days per person (date each item)

Clothing/Blanket

Sanitation – Buckets, Disinfectants, trash bags, toilet paper, soap

Cooking/Heating – Candles, portable stove, matches, aluminum foil, mess kits, disposable paper products, cooking utensils

Hygiene – Soap, toothbrush, toothpaste, shampoo, lip balm, lotion, deodorant, feminine needs, washcloth and towel

First Aid Kit

Tools - Pliers, crescent wrench, hammer

Other items may include stress/Morale boosters (scriptures, small games, hard candy, needlework, pencils, crayons), infant and

toddler needs, senior adults and disabled special needs, pets, and documents (Legal, financial, insurance, medical records, other important records).

FAMILY FIRST AID KIT

First aid kits are an essential part of family preparedness. Contents should be arranged so that a needed item can be found quickly without unpacking the entire contents. Keep the first aid kit in a dry place, out of reach of children, yet readily accessible in case of an emergency. Label all supplies and date all medications.

Take inventory at least once a year and replace items that have been used, expired, or deteriorated (antiseptic swabs). Include a basic first aid manual.

The following items are recommended for a first aid kit. Bold items are the most important. Filling a small toolbox with items your family needs may be better than buying a preassembled kit. Focus on being able to treat things that are most likely to happen such as blisters, cuts, burns, scrapes, punctures, or sprains. Keep vaccinations current.

BANDAGES

Ace wrap bandages

Band-aids (flat, fingertip, knuckle, Cotton balls and Q-tips, Eye pads)

Gauze bandage rolls (Kerlix or Kling 3" and 4")

Sterile gauze pads (4"x4" & 2"x2")

Moleskin (for friction blisters)

Steri-Strips – butterfly bandages

Tape - hypoallergenic cloth/adhesive – 3/4", 1", 2"

Triangular bandage 36"x36"x52"

MEDICATIONS

Advil/Tylenol/aspirin (liquid/chewable for children)

Antibiotic ointment - Neosporin, Bacitracin, Betadine, alcohol swabs

Antihistamine - Benadryl

Antiseptic cleansing solution – hydrogen peroxide

Calamine lotion

Decongestants – pseudoephedrine,

Triaminic, Dimetapp

Diarrhea remedy – Imodium, Ka pectate, Pepto Bismol

Drops (eye, ear, nose)

Hydrocortisone cream

Sunscreen/insect repellent

Lubricant – Vaseline, K-Y Jelly, A&D

Ointment

Personal prescriptions (i.e. diabetic, high blood pressure, a 30-day supply close at hand)

Rubbing alcohol

Throat lozenges

OTHER

Cup

Flashlight & batteries

Ice bag – chemical cold pack

Gloves

Hot water bottle – chemical heat pack

Knife

Matches

Mask – face shield for CPR

Medicine dropper

Money (coins) for phone calls

Nail clippers

Needle & thread

Paper & pencil

Paper bag for hyperventilation

Plastic bags – Ziplock for human waste or trash

Razor blades

Safety pins

Scissors

Space blanket

Splints (tongue depressors/Popsicle sticks)

Soap – antibacterial, thermometer

Tissues, **tweezers**

Water/water purification tablets

FAMILY EMERGENCY ADDITIONAL INFO

The website contains additional information regarding shelter-in-place, car survival kits, safe drinking water practices, food storage, financial preparedness, heating cooking and lighting, what to do for disasters such as earthquake, fire, wildfire, high winds, power outage, winter storms, floods, nuclear and chemical disasters, and epidemics.

[Refer to ksspreparedness.org for additional information.](http://ksspreparedness.org)