

## EMERGENCIES/STORMS

### HURRICANE PREPAREDNESS CHECKLIST

- |   |   |
|---|---|
| <input type="checkbox"/> Automobile, fill with fuel   | <input type="checkbox"/> Pets (see <a href="#">Pets, Traveling with Pets checklist</a> )                  |
| <input type="checkbox"/> AC, turn down prior to loss of electric to cool house  | <input type="checkbox"/> Phone (simple phone that doesn't require electricity to work)                    |
| <input type="checkbox"/> Attic exhaust fan, turn off and cover if possible  | <input type="checkbox"/> Phone, cell fully charged  |
| <input type="checkbox"/> Baby needs (see <a href="#">Travel/Leisure, Traveling With Babies and Children Checklist</a> )   | <input type="checkbox"/> Phone numbers, emergency and after storm help                                    |
| <input type="checkbox"/> Batteries, extra (radios, flashlights)   | <input type="checkbox"/> Phone numbers, place of employment contact numbers                               |
| <input type="checkbox"/> Batteries, charge cordless drill batteries   | <input type="checkbox"/> Prescriptions filled in advance  |
| <input type="checkbox"/> Bring in all outdoor items that are not permanently attached   | <input type="checkbox"/> Propane, for grill and camping stove   |
| <input type="checkbox"/> Camping stove  | <input type="checkbox"/> Radio, portable  |
| <input type="checkbox"/> Cash   | <input type="checkbox"/> Radio, weather   |
| <input type="checkbox"/> Charger, battery operated (cell phone)   | <input type="checkbox"/> Radio, emergency information stations  |
| <input type="checkbox"/> Computer backup hard drive or computer CPU moved to a safe place   | <input type="checkbox"/> Rain clothing and equipment  |
| <input type="checkbox"/> Cooler, set up with ice, drinks and cold food items  | <input type="checkbox"/> Rope and stakes  |
| <input type="checkbox"/> Designate person you will call or text to inform of your status after the storm; give phone/text list of other family and friends to this designated person to spread the word | <input type="checkbox"/> Shelter, determine safe place to stay during storm                               |
| <input type="checkbox"/> Documents, important files and photos in waterproof container  | <input type="checkbox"/> Shutters (window coverings) ready to install                                     |
| <input type="checkbox"/> Exterior inspection (for potentially damaging landscaping, needed repairs, items stored outdoors)  | <input type="checkbox"/> Sprinkler system, turn off   |
| <input type="checkbox"/> Family and friend list that can be called on to help   | <input type="checkbox"/> Squeegee, floor  |
| <input type="checkbox"/> Fire extinguisher  | <input type="checkbox"/> Tarp(s)  |
| <input type="checkbox"/> First Aid Kit (see <a href="#">Medical/First Aid, First Aid Kit, Home Checklist</a> )  | <input type="checkbox"/> Tools (see <a href="#">Tools/Workshop, Storm checklists</a> )                    |
| <input type="checkbox"/> Flashlights and portable lights fully charged  | <input type="checkbox"/> Towels   |
| <input type="checkbox"/> Food, non-perishable for minimum of one week   | <input type="checkbox"/> Trash and lawn bags  |
| <input type="checkbox"/> Food and drink opening devices, non-electric   | <input type="checkbox"/> TV - digital TV tuner box (if you have power or a generator) or battery operated |
| <input type="checkbox"/> Generator maintained   | <input type="checkbox"/> Vacuum, Wet/Dry  |
| <input type="checkbox"/> Generator fuel and oil   | <input type="checkbox"/> Water, bottled, for minimum of one week  |
| <input type="checkbox"/> Gloves   | <input type="checkbox"/> Water, fill bathtubs and sinks with water  |
| <input type="checkbox"/> Hygiene products in plastic bag (see <a href="#">Travel/Leisure, Hygiene Products Checklist</a> )  | <input type="checkbox"/> Water purification tablets and/or unscented bleach                               |
| <input type="checkbox"/> Ice and ice packs  | <input type="checkbox"/> _____  |
| <input type="checkbox"/> Insect repellent lotion or spray   | <input type="checkbox"/> _____  |
| <input type="checkbox"/> Insurance records  | <input type="checkbox"/> _____  |
| <input type="checkbox"/> Insurance, hurricane (wind and flood)  | <input type="checkbox"/> _____  |
| <input type="checkbox"/> Inventory of home and possessions at another location  | <input type="checkbox"/> _____  |
| <input type="checkbox"/> Lighter  | <input type="checkbox"/> _____  |
| <input type="checkbox"/> Medical list of all prescriptions and information  | <input type="checkbox"/> _____  |
| <input type="checkbox"/> Motion detector off  | <input type="checkbox"/> _____  |
| <input type="checkbox"/> Pets, predetermine and make arrangements for pet friendly shelter  | <input type="checkbox"/> _____  |
| <input type="checkbox"/> Pets (see <a href="#">Pets, Pet Medical Kit checklist</a> )  | <input type="checkbox"/> _____  |