Create a Personal Support Network

Ask family, friends, others to be part of your plan. Share each aspect of your plan with everyone in your group, including a friend or relative in another area who would not be impacted by the same emergency who can help if necessary.

WHAT ELSE DOES YOUR BUDDY NEED TO KNOW?

LOCAL EMERGENCY MANAGEMENT AGENCY

New Castle County: 302-395-2700 Kent County: 302-735-3461 Sussex County: 302-855-7801

Other Resources

http://www.ready.gov/individuals-ac cess-functional-needs

http://www.redcross.org/prepare/location/home-family/disabilities

http://www.preparede.org

http://www.allreadyde.org



PREPAREDNESS BUDDY



Your Name

Personal Emergency Plan

My Personal Support Network Buddy System Style

Office of Preparedness: 302-223-1720

Find a Preparedness Buddy

Find someone you can depend on to serve as your Preparedness Buddy. Make sure they understand and agree to be your buddy before developing a preparedness plan.

They can check on you and provide you with assistance if an emergency incident occurs.

PREPAREDNESS BUDDY

Name	
Home Phone	
Cell	
Email	

ALTERNATE BUDDY

Name
Home Phone
Cell
Email

Do you also have an out-of-state relative or friend who may not be impacted by the same emergency who can help you if necessary?

Name				
Home Phone				
Cell				
Email				
ALTERNATE				
Name				
Home Phone				

Cell

Email

Make sure someone in your support network has an extra key to your home and knows where you keep your emergency supply kit.

Important Information MEDICATION YOU NEED (DOSAGE)	Medical and Disability Service Providers	Maintain a list of important papers you will need. Tell your buddy where to find them.	Essential Items to Have in Case of an Emergency
	PRIMARY CARE PHYSICIAN Name	 □ Photo ID □ Medical Insurance Card □ Insurance Policies □ Bank Account Number(s) □ Credit Card Information □ Birth Certificate □ Marriage Certificate □ Divorce Decree 	 Water (one gallon per day per person for at least three days = three gallons each) Food (at least a three-day supply of non-perishable food) Medications (at least one-week supply) Extra eye glasses Extra batteries for hearing aids
DURABLE MEDICAL EQUIPMENT AND SUPPLIES YOU NEED	Depending on your needs, you may also want to have a medical alert tag or bracelet, or written description(s) of your disability and support needs, in case you are unable to describe the situation in an emergency. WHAT WILL YOU NEED FOR YOUR PET OR SERVICE ANIMAL?	It is a good idea to keep your original documents sealed in a waterproof or ziplock bag in a lock box. Make copies, and/or place copies on a portable flash drive.	 Personal communication board or tablet if you might need assistance with being understood or understanding others If you use a motorized wheelchair, include a battery charger or manual wheelchair for backup Cell with spare charged battery and charger Flashlight and extra batteries Cash or travelers checks (including loose change)
ALLERGIES (FOOD, DRUGS, OTHER)	 □ Pet food - three-day supply □ Water - three-day supply □ Medications - three-day supply □ Crate or carrier □ Medical and vaccination records □ License and microchip numbers □ Collar and ID tag, harness or leash □ Current photos of you with your pets □ Bedding and toys □ Cat litter, box, and waste bags 	DO YOU HAVE SPECIFIC TRANSPORTATION REQUIREMENTS?	 Portable Radio (hand crank or battery powered with extra batteries) Extra clothing and blankets Hygiene items (hand sanitizer, moist wipes, toilet paper, adult or child diapers, feminine hygiene items) First-aid kit Manual can opener