

Emergency Information Sheet

Address: _____

Phone: _____

Important Contacts

| Type | Name | Number |
|------------------|------|--------|
| Landlord | | |
| Property Manager | | |
| Neighbor | | |
| Neighbor | | |
| Police | | |
| Fire | | |
| Ambulance | | |
| | | |
| | | |
| | | |

Home Maintenance

| Type | Name | Number |
|---------------|------|--------|
| Plumber | | |
| Electrician | | |
| Repair Person | | |
| | | |
| | | |

Utility Companies

| Type | Name | Number | Account # |
|-----------|------|--------|-----------|
| Electric | | | |
| Gas | | | |
| Oil | | | |
| Telephone | | | |
| Cable | | | |
| Internet | | | |
| | | | |
| | | | |

Location of important Items

| Item | Location |
|----------------------|----------|
| Fire Extinguisher | |
| Flashlight | |
| Circuit Breaker | |
| Water Valve Shut off | |
| | |
| | |

Notes: _____