



PERSONAL EMERGENCY EVACUATION PLAN

General Details	
Occupants Name:	
Location:	Building/Facility:
Floor:	Room Number:
Phone:	
Evacuation Requirements	
Is an Assistance Animal involved? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Is the occupant trained in the emergency response procedures: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Preferred method of receiving updates to the emergency response procedures:	
<i>e.g. text, email, Braille</i>	
Preferred method for notification of emergency:	
<i>e.g. visual alarm, personal vibrating service, SMS</i>	
Type of assistance required:	
Equipment required for evacuation:	

Egress Procedure:	
Designated assistants and contact details:	
Are your designated assistants trained in emergency response procedures (including evacuation procedures)?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
Are your designated assistants trained in the evacuation equipment?	
Diagram required for preferred route for assisted evacuation? <input type="checkbox"/> Yes (please attach) <input type="checkbox"/> No	
Issue Date:	Review Date:
Occupant approved:	Date:
Chief Warden:	Date:

Once completed:

Occupant, Chief Building Warden, local Building Warden and designated assistants to each receive a copy.