



Municipal Newsletter - Office of the Fire Chief



(The Municipal Newsletter is now available on-line @ www.redlake.ca)
May 4, 2010, Volume No. 10-10

EMERGENCY PREPAREDNESS

YOU CAN'T PREDICT AN EMERGENCY BUT YOU CAN PREPARE FOR ONE. Emergencies and disasters can happen at any time.

The Municipality of Red Lake Fire and Rescue Service is encouraging all residents to take time to discuss emergency preparedness with your family. This includes creating an emergency plan as well as building emergency survival kits.

Important Considerations....

- During an emergency you may have no electrical power.
- During an emergency you may need to go to an emergency evacuation shelter. It is recommended that you and your family have a designated contact person that resides outside of your immediate community. This way, in the event of an evacuation, family members can easily notify each other by calling their designated contact person.
- Prepare a contact information list of all your emergency contact persons and provide a copy to your designated contact person. Also keep a copy of this list on your person, in your survival kit, at work, at home and in your vehicle.
- Install working smoke alarms on every floor of your home and outside all sleeping areas. Test smoke alarms on a monthly basis and replace batteries every six months.
- Develop and practice regularly a home emergency plan and a fire escape plan.

TAKE THE CHALLENGE!

Emergency Preparedness Week May 2-8, 2010, marks the event's 15th anniversary of a Canada-wide initiative to increase awareness about individual and family preparedness.

From April 29th to May 31st, 2010, individuals can take part in the Emergency Preparedness Challenge by visiting www.ontario.ca/beprepared. Those who successfully complete a short, age-appropriate quiz will be eligible to win prizes, which will be awarded in early June.

BE THE FAMILY HERO.
TAKE THE EMERGENCY PREPAREDNESS CHALLENGE AT
ONTARIO.CA/BEPREPARED

IBC  BAC | Insurance Bureau of Canada
Bureau d'assurance du Canada

 Ontario



EMERGENCY SURVIVAL KIT

The emergency survival kit items listed below are only a suggestion and may or may not apply to every emergency situation and/or a person's special needs. Therefore you should decide which essential items to include for yourself and your family members.

Pack and store all emergency survival items in an easy-to-access and easy-to-transport container should you need to evacuate. Ensure that all family members are aware of where the emergency kit is stored.

Emergency survival kits should contain enough supplies to last 3 days.

Replace food and water every 6 months.

**EMERGENCY SURVIVAL KIT
CHECKLIST**

- Flashlight and batteries**
- Radio and batteries or crank radio**
- Spare batteries** (for radio or flashlight)
- First-aid Kit**
- Candles and matches/lighter**
- Extra car keys and cash**
- Medication(s)**
- Playing cards**
- Backpack/duffel bag** (to hold all the emergency survival kit items)
- Important papers** (identification)
- Food and bottled water**
- Can Opener and Utensils**
- Clothing and footwear**
- Blankets or sleeping bags**
- Toilet paper and other personal items**
- Whistle** (to attract attention, if needed)



MUNICIPALITY OF RED LAKE

EMERGENCY PLAN

EVACUATION PRIORITY REGISTRATION FORM

As part of the Annual Review of the Municipality of Red Lake's Emergency Plan, the Municipality is requesting residents who require additional assistance complete the attached evacuation Priority Registration Form.

It is most important that in an emergency situation, municipal personnel are aware of residents who would require additional assistance.

Please ensure that a form is completed for your family members, neighbours or friends and that it is returned to the Municipal Office or the Red Lake Recreation Centre.

2010 EVACUATION PRIORITY REGISTRATION FORM

Drop off Locations: Municipal Office in Balmertown or Red Lake Recreation Centre

Mail to P.O. Box 1000, Balmertown, Ontario, P0V 1C0

GENERAL INFORMATION

Name: _____

Address: _____

Specific Entrance to House: _____

Phone: _____ Number of People in Household: _____

MEDICAL INFORMATION

Do you have any of the following diseases, which would affect your breathing?	YES	NO
Chronic Bronchitis		
Asthma		
Emphysema		
Lung Cancer		
Other (please list here)		
Do you have diabetes or heart problems?		
Are you physically disabled? (Cane, Wheelchair or Walker)		
Are you visually impaired?		

TRANSPORTATION

Do you have your own transportation to the Registration Area if we have to be evacuated? Yes No

If no, do you have family or friends who will bring you to the Registration Area if we have to be evacuated from the community? Yes No

***** PLEASE ADVISE THE CLERK'S OFFICE @ 735-2096 EXT. 232, OF ANY CHANGES TO THIS FORM. *****

FOR OFFICE USE ONLY

	✓	COMMENTS
High Risk		
Moderate Risk		
Low Risk		
No Risk		
Transportation Required		