

# FARM / FACILITY EMERGENCY PRE-PLAN INFORMATION

Complete one form for each equine facility building (arena, barn, feed storage, etc.) on the premises where animals have access to, are adjacent to, or are confined -- Recommended bi-annual revision /updates be completed and presented to local fire/rescue service

Date: \_\_\_\_\_

## General Information

Location Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

GPS Coordinates: X - \_\_\_\_\_ Y- \_\_\_\_\_

## Owner/Responsible Party Information

Property Owner Name: \_\_\_\_\_ Contact #: \_\_\_\_\_

*If different than above*

Responsible Party (Owner, Tenant, Agent, etc.) Name: \_\_\_\_\_

Affiliation to Property: \_\_\_\_\_ Contact #: \_\_\_\_\_

## Emergency Contact Information (at least one local contact – at least one should have credit card or payment information to cover expenses)

Name: \_\_\_\_\_ City/State: \_\_\_\_\_ Contact #s: \_\_\_\_\_

Name: \_\_\_\_\_ City/State: \_\_\_\_\_ Contact #s: \_\_\_\_\_

## Building Information

Building Identification (Name, Number or Description): \_\_\_\_\_

Directions / Access to Building from main roadway: \_\_\_\_\_

Alternate Directions / Access to Building: \_\_\_\_\_

Year of Original Construction: \_\_\_\_\_ Year of Last Remodel (if applicable): \_\_\_\_\_

Number of Floors/Stories: \_\_\_\_\_ Number of Stalls/Pens: \_\_\_\_\_ Number of Rooms: \_\_\_\_\_

Approximate Dimensions of Building: \_\_\_\_\_ Length \_\_\_\_\_ Width \_\_\_\_\_ Height \_\_\_\_\_

Construction Type (concrete, wood, steel, etc.): \_\_\_\_\_

Roof Construction Type (wood, tin, shingle, etc.): \_\_\_\_\_

Is there a permanent or temporary human living area in or attached to the building? \_\_\_\_\_

Average Human Occupancy: \_\_\_\_\_ Daytime \_\_\_\_\_ Nighttime \_\_\_\_\_

\_\_\_\_\_ Human residents in or adjacent to building \_\_\_\_\_ Number of disabled human occupants \_\_\_\_\_

Average number of equine in or near the building on daily basis: \_\_\_\_\_

Types of Animals in building (other than equine species): \_\_\_\_\_

Average number of animals inside building during daytime hours: \_\_\_\_\_ ...during nighttime hours: \_\_\_\_\_

Access points for ingress and egress: \_\_\_\_\_

Key Location (if applicable): \_\_\_\_\_

Types of hazardous materials inside or around building (propane cylinders, batteries, fuels, chemicals, fertilizers, etc.): \_\_\_\_\_

Hazardous Materials Placard Location (if applicable): \_\_\_\_\_

Is hay, fuel, bedding or other combustibles stored inside the building? \_\_\_\_\_

If yes, what type and where? \_\_\_\_\_

If no, are any of those items stored in close proximity to the building and how far from the building? \_\_\_\_\_

Fire Alert: Alarms present? \_\_\_\_\_ Type (Smoke, Heat, etc.)? \_\_\_\_\_

If yes, is it monitored by company for automatic dispatch? \_\_\_\_\_

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Fire Suppression: Suppression System present? \_\_\_\_\_  
Type (Sprinkler, Gas, Powder, etc.)? \_\_\_\_\_  
If yes, how is it supplied? \_\_\_\_\_

## Property Information

Directions to most accessible point for vehicle entry (consider road/driveway width and turning radius of entering vehicles, overhead clearance, and space to turn around or exit): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Special instructions for entrance to the property (gate code, key location, Knox Box, keyholder, etc.): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Areas to secure animals once evacuated from incident area (pastures, paddocks, corrals, etc. - animals are not guaranteed to be separated in an emergency): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Available and accessible water drafting areas (points where the fire department could get water if no fire hydrant nearby - pools, creeks, ponds, cisterns, etc.): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Utility Information

### Power Information:

Type of Power (Electric, Solar, etc.): \_\_\_\_\_

Name of Company: \_\_\_\_\_ Contact #: \_\_\_\_\_

Location of Meter/Shut Off: \_\_\_\_\_

### Fuel Information:

Type of Fuel (Natural Gas, Propane, etc.): \_\_\_\_\_

Name of Company: \_\_\_\_\_ Contact #: \_\_\_\_\_

Location of Meter/Shut Off: \_\_\_\_\_

### Water:

Type of Water (Well, City/County, etc.): \_\_\_\_\_

Name of Company: \_\_\_\_\_ Contact #: \_\_\_\_\_

Location of Meter/Shut Off: \_\_\_\_\_

## Fire Department Information

Name: \_\_\_\_\_  
Contact #s: \_\_\_\_\_

District/ Station: \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Contact Number(s): \_\_\_\_\_

## Notes:

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