



Wildfire Evacuation Checklist



TAKE, GRAB & GO BAG – See reverse side for list of items

FAMILY MEMBERS/PETS/LIVESTOCK:

- If possible evacuate all family members not essential to preparing the house for wildfire.
- Plan several evacuation routes from your home.
- Designate a safe meeting place and “out of area” contact person.
- Relay your plans to the contact person.
- Evacuate pets and livestock whenever possible, AND never turn animals loose.

VEHICLE PREPARATION:

- Place vehicles outside the garage pointing out.
- Keep vehicle fuel tank above half-full during fire season.
- Roll up the windows to keep out smoke and ash.
- Close the garage door.
- Place essential items in the car.
- If you do not drive, make other arrangements for transportation in advance.

PREPARING THE HOUSE:

- Close all exterior doors and windows.
- Turn off all pilot lights.
- Place combustible patio furniture or other items in the house or garage.
- Shut off propane or gas tanks, move to a secure location away from the house.
- Make sure that all garden hoses are connected to faucets and attach nozzles set on “spray”
- Turn on outside lights.
- If you have an emergency water source (pool, pond, etc.) and/or portable pump, clearly mark its availability so it can be seen from the street or place a note on your front door.

LAST STEP

- When you have evacuated your house, provide this form to an Evacuation Centre or tape this form to your front door. This advises emergency services that you have evacuated from your home.

NOTES: Mark down other items you may wish to take with you (i.e. family heirlooms, laptops, etc.)



Emergency Evacuation Kit

Grab & Go Bag



| Food | Medical | Toiletries |
|--|--|--|
| <input type="checkbox"/> 1 litre of water for each person <input type="checkbox"/> Favourite high energy snacks | <input type="checkbox"/> Medications and a copy of prescriptions <input type="checkbox"/> Spare eyeglasses <input type="checkbox"/> Hearing aids and batteries <input type="checkbox"/> Small first aid kit | <input type="checkbox"/> Toothbrush and toothpaste <input type="checkbox"/> Soap and/or hand sanitizer <input type="checkbox"/> Comb and/or brush <input type="checkbox"/> Toilet paper <input type="checkbox"/> Feminine hygiene products |
| Important Documents | Other | Comfort Items |
| <input type="checkbox"/> Family emergency contact list <input type="checkbox"/> Copy of care card number(s) <input type="checkbox"/> Insurance papers and add pictures of your house and contents <input type="checkbox"/> Passport number(s) <input type="checkbox"/> Spare keys for house/car <input type="checkbox"/> Wills/Estate | <input type="checkbox"/> Hand-crank flashlight <input type="checkbox"/> Radio (with batteries) <input type="checkbox"/> Orange Garbage Bag (could be used as a poncho or for garbage) <input type="checkbox"/> Emergency blanket for each member <input type="checkbox"/> Small hoodie or jacket <input type="checkbox"/> A good whistle <input type="checkbox"/> Cash - coins and small bills | <input type="checkbox"/> Some family pictures <input type="checkbox"/> Small games or stuffy for children |

| Specialty Items | | | |
|--|--|---|---|
| Baby Care | | Pet Care | |
| <input type="checkbox"/> Baby Food <input type="checkbox"/> Bottles <input type="checkbox"/> Medications | <input type="checkbox"/> Diapers <input type="checkbox"/> Wipes | <input type="checkbox"/> Kennel <input type="checkbox"/> Water <input type="checkbox"/> Medications | <input type="checkbox"/> Leash, collar and ID Tag <input type="checkbox"/> Food and treats |

This kit should be placed at the door you use the most to exit your home so you don't have to go looking elsewhere for it. If local authorities call for an evacuation, be prepared to leave NOW. Take your Grab & Go Bag and cell phone with you.



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LEAVE THIS FORM IF/WHEN YOU EVACUATE:

| | |
|---|--|
| Name: _____ | |
| Address: _____ | |
| Cellular Number: _____ | Email Address: _____ |
| Who is with you: 1). _____ 2). _____ 3). _____ 4). _____ 5). _____ 6). _____ | Where are you headed: _____ Emergency contact at destination Name: _____ Phone: _____ Email: _____ |
| <input type="checkbox"/> Provide this form to an Evacuation Centre or tape to your front door. | <input type="checkbox"/> Shut off gas utilities (at the gas meter) <input type="checkbox"/> Move propane cylinders and other combustibles to a secure location. |