Emergency Action Plan

Complete an EAP for each individual farm or site where livestock is located.

Site/Farm Na	ne
Address	
Phone #	
Directions	
Other Emerge	ncy Contacts
Enter contact	person names and phone numbers if applicable
NTACT	PHONE NUMBER

CC **Fire Department Sheriff/Police Poison Control** Veterinarian Hospital **Doctor/Dentist Insurance Agent Electric Company** Water/Plumbing Heating/Gas/Propane Ventilation **Feed Dealer** Fire Extinguishers are located: First Aid Kits are located: **Location of Severe Weather Shelter** Central place to meet in case of emergency Animal numbers per barn