2027 Hurricane/Emergency Entity Contact Information Form

This information will remain confidential and is critical for us to be able to assist you quickly and effectively after a storm

Entity Name: _____

Entity Address: _____

Pastor/Principal or Agency Head Name: _____

Cell Phone: _____

Land line: _____

Please, list below the names and contact information for TWO Property/Plant Manager's/Staff to be contacted after a storm or emergency event:

Name 1: _____

Position: _____

Cell Phone: _____

Land line: _____

Name 2: _____

Position: _____

Cell Phone: _____

Land line: _____

Are you in a mandatory evacuation area? YES☐ NO☐

PLEASE RETURN THIS FORM:

BY EMAIL: bpclerk@theadom.org

BY FAX : (305) 754 - 6792