



2024 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:
BY FAX : (305) 754 - 6792