

**EXETER TWP EMERGENCY DATA & DOCUMENTATION  
CONTACTS & REMOVAL PROCESS IN EXECUTING AN EVACUATION, IF NEEDED  
ORDINANCE #0001 OF 2000/ #10-22-12/7- 10/7/2015**

**Year**

**FULL NAME OF RESPONSIBLE PERSON TO CONTACT**

Name \_\_\_\_\_  
Home Address \_\_\_\_\_  
Home Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_  
E-Mail \_\_\_\_\_

**SECONDARY RESPONSIBLE PERSON TO CONTACT**

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Home Address \_\_\_\_\_  
Cell Phone \_\_\_\_\_  
E-Mail \_\_\_\_\_

**RECREATIONAL TYPE VEHICLE MFG / COLOR / LICENSE PLATE**

Manufacturer \_\_\_\_\_  
Color \_\_\_\_\_  
License Plate State and #: \_\_\_\_\_

**Please explain your plans for removing the vehicle and property contents in the event an emergency evacuation be declared by either Exeter Township, Luzerne County, or the state of Pennsylvania.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ Approved Date \_\_\_\_\_

Exeter Twp Luz.Co. Emergency Manager/Floodplain Admin.