

## EMERGENCY RESPONSE GUIDE ORDER FORM

FM-016V3

<b>BUSINESS NAME</b>	
<b>BUSINESS ADDRESS</b>	
<b>BUSINESS PHONE NUMBER</b>	
<b>CONTACT PERSON:</b>	
<b>COLOUR CHOICES FOR TABS - PLEASE TICK THE PREFERRED OPTION</b>	
ORANGE / YELLOW / RED                      OR                      GREEN / BLUE / RED	
<b>PERSONALISING DETAILS FOR YOUR BUSINESS - Please state additional information &amp; amendments to the example plan.</b>	
<b>SIGNAL TO SHOW EMERGENCY</b>	Define your "EMERGENCY SIGNAL" i.e. short blasts on site horn
<b>ALL CLEAR</b>	Define your "all clear" signal i.e. short blasts on site horn OR verbal notification
<b>EVACUATION</b>	Your designated assembly area is:
	Your designated warden / fire person is:
<b>HAZARDOUS SUBSTANCES</b>	E.g. For Spills indicate type of spill kit required and where it is located.
<b>FIRE</b>	
<b>FLOOD</b>	
<b>BOMB THREAT</b>	
<b>FIRST AID</b>	State where First Aid Kits are Located:
	List all first Aiders on-site:
<b>EARTHQUAKE</b>	
<b>EMERGENCY NUMBERS</b>	List Emergency phone numbers (may include Management & Staff).
<p style="color: red; font-size: small;">Please ensure that you adapt this Response Guide "flip chart" to replicate the procedures you have on your business site.                      You may choose to request your business logo be placed on your flipchart. This can be arranged however a businesss logo will need to be forwarded to our office via email. Please advise if this is required.</p>	
<b>NUMBER OF GUIDES ORDERED</b>	
<b>TOTAL AMOUNT TO BE PAID</b>	\$50.00 + GST PER GUIDE

**Payment can be made by:**

**Cheque** – Payable to INFERNO CONSULTANTS and sent to PO Box 9404, Hamilton

**Bank Deposit** – Payable to INFERNO CONSULTANTS – BNZ (Cambridge) 020300 0141542 02

*THANK YOU FOR YOUR CUSTOM*