

# EVACUATION & GO-BAG CHECKLIST



## BEFORE EVACUATION

- Tune your portable AM/FM radio to KCBS 740 AM or KQED 88.5 FM for emergency information.
- Secure your pet(s) in their carriers and gather necessary supplies (leashes, water, food, etc.).
- Gather essentials (evacuation plan, Go-Bags, vital documents, maps, valuables, water, food, etc.) and put them in an accessible location for quick access, such as by the front door.
- Check on or call neighbors to alert them and offer to assist any with special needs.
- Dress in long pants/long sleeves (cotton/denim or wool), sturdy boots, goggles, mask and gloves.
- Carry vehicle keys, wallet, ID, flashlight/headlamp, fully charged cell phone and spare battery.
- If you feel unsafe and can leave before an evacuation is ordered, do so.** Communicate where you will go or a meet-up location to family members and your out-of-area emergency contact.

## IF TIME ALLOWS

- Shut all house windows and doors and leave unlocked, turn indoor and outdoor lights on and turn off the HVAC system.
- Remove combustible window curtains and move furniture away from windows.
- Move combustible outdoor items (furniture, trash cans, etc.) into a garage or at least 30 feet away from the house.
- Move any extra vehicles off the street to give responders room.
- Park your vehicle facing toward the street, with essential items inside and windows closed.
- Leave a note outlining your plans.

**Remain as calm as possible!**

## DURING EVACUATION

- If police, fire or emergency personnel order you to evacuate, **leave the area immediately!**
- Take pets with you, do not leave them behind as you may not be able to return for days.
- Assist others as you are best able to, but don't put yourself in additional danger doing so.
- If evacuating by vehicle, take only one or better carpool in order to help reduce congestion.
- In the car, turn on headlights, close windows, drive slowly and defensively and be observant.
- Proceed as safely away from the threat as possible – if trapped, you are better protected inside the vehicle or inside a building. Evacuate on foot only as a last resort.

## AFTER EVACUATION

- Report in at your pre-selected assembly area or family meeting place if possible.
- Notify your out-of-area contact and share your and your family's location and status.
- Make a list of those who evacuated safely and those who still might be in the danger area and give a copy of the list to police, fire or emergency personnel.

# ONE GO-BAG PER FAMILY MEMBER

Add these recommended items to a backpack or other easy-to-carry bag such as a duffel or a sturdy shopping bag. Include other supplies as needed. Keep your Go-Bag in a quick-to-reach location such as an entry-hall closet or near a door in a garage. Make sure it is labeled with your name and address. **It is a good idea to also have emergency Go-Bags in your vehicles and at work.**

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|---|--|
| <input type="checkbox"/> Battery-powered AM/FM/NOAA radio, local station list, 2-way radio, extra batteries | <input type="checkbox"/> Copies of important documents such as IDs/driver's licenses for proof of residence, birth certificates, passports, insurance policies, prescriptions, family/pet photos, contact list, etc. |
| <input type="checkbox"/> LED headlamp and flashlight, extra batteries                                       | <input type="checkbox"/> Laptop/tablet, backup drives, chargers  |
| <input type="checkbox"/> Chargers and power banks for cell phones   | <input type="checkbox"/> _____   |
| <input type="checkbox"/> Emergency phone list and contacts  | <input type="checkbox"/> _____   |
| <input type="checkbox"/> Map marked with possible evacuation routes   | <input type="checkbox"/> _____   |
| <input type="checkbox"/> Water, non-perishable energy bars and snacks                                       | <input type="checkbox"/> _____   |
| <input type="checkbox"/> N95 mask, bandanna, goggles, gloves and hat  | <input type="checkbox"/> _____   |
| <input type="checkbox"/> Protective clothing, rain/cold-weather gear  | <input type="checkbox"/> _____   |
| <input type="checkbox"/> First aid kit, whistle, knife, waterproof matches                                  |  |
| <input type="checkbox"/> Spare eyeglasses/contact lenses  |  |
| <input type="checkbox"/> Prescription medications, personal supplies  |  |
| <input type="checkbox"/> Toiletry and sanitation items, trash bags  |  |
| <input type="checkbox"/> Roll of duct tape, emergency blanket   |  |
| <input type="checkbox"/> Gas shut-off wrench/pliers to turn off gas valve                                   |  |
| <input type="checkbox"/> Extra vehicle and house keys, cash in small bills                                  |  |
| <input type="checkbox"/> Paper, pencils, permanent marker   |  |

## NOTES

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# ONE STAY-BOX PER HOUSEHOLD

The additional items below can be stored in a large container inside or in a garage, or in a secure, water-proof box outside your residence. This will then be your Stay-Box of supplies to get you through several days or more if you are sheltering-in-place indoors or outdoors.

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|---|---|
| <input type="checkbox"/> One gallon of water per person per day for at least ten days (or as much as you can) | <input type="checkbox"/> Sleeping bags and pads, blankets, tent |
| <input type="checkbox"/> At least a ten-day supply of non-perishable food, including for any infants          | <input type="checkbox"/> _____                                  |
| <input type="checkbox"/> Pet supplies and food for at least ten days  | <input type="checkbox"/> _____                                  |
| <input type="checkbox"/> Fire extinguisher (Type A-B-C)   | <input type="checkbox"/> _____                                  |
| <input type="checkbox"/> Additional sanitary supplies, bucket and bags  | <input type="checkbox"/> _____                                  |
| <input type="checkbox"/> Cook stove/fuel, cookware, cups, utensils  | <input type="checkbox"/> _____                                  |
|   | <input type="checkbox"/> _____                                  |
|   | <input type="checkbox"/> _____                                  |