



**CITY OF
MUKILTEO**

Fire Department

Emergency Preparedness in a Year

Number of people in your household: _____

Month		
1	<p><u>Food</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Water (1 gal/person x 7 days) <input type="checkbox"/> Ready-to-eat canned meats, fruits, vegetables (1 can/person x 7 days) <input type="checkbox"/> Canned juice, milk, soup (if powdered, store extra water) <input type="checkbox"/> Comfort/stress foods—cookies, hard candy, sweetened cereals, lollipops, instant coffee, tea bags. <input type="checkbox"/> High energy foods—peanut butter, jelly, crackers, granola bars, trail mix, dried fruit, nuts. <input type="checkbox"/> Staples—sugar, salt, pepper, spices. <input type="checkbox"/> Vitamins <input type="checkbox"/> Foods for infants, elderly, special diets. 	<ul style="list-style-type: none"> <input type="checkbox"/> If needed: pet food, water (1 gal/pet x 7 days), diapers, feminine hygiene supplies. <input type="checkbox"/> Hand operated can opener <input type="checkbox"/> Permanent marker <p><u>Action Items</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Date perishable items with marker. <input type="checkbox"/> Decide upon/notify out-of-area contact who can coordinate information for scattered family members. <input type="checkbox"/> Sign up for AlertSense. <input type="checkbox"/> Identify a storage area(s) for your supplies (pantry, several heavy-duty water-tight plastic garbage cans that can be stored outside, etc.)
2	<p><u>Sanitation</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Extra tooth brush/travel size toothpaste for each person. <input type="checkbox"/> Toilet paper, baby wipes <input type="checkbox"/> Soap (bath, dish, liquid detergent) <input type="checkbox"/> Personal hygiene items <input type="checkbox"/> Plastic garbage bags, ties (for personal sanitation use) <input type="checkbox"/> Plastic bucket with tight lid <input type="checkbox"/> Disinfectant <input type="checkbox"/> Household chlorine bleach with medicine dropper <input type="checkbox"/> Paper towels <p><u>First Aid Kit</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Sterile adhesive bandages (assorted) <input type="checkbox"/> Sterile gauze pads (2", 4") <input type="checkbox"/> Hypoallergenic adhesive tape <input type="checkbox"/> Triangular bandages (3) <input type="checkbox"/> Sterile Roller Bandage (2", 3", 3 	<ul style="list-style-type: none"> <input type="checkbox"/> Thermometer <input type="checkbox"/> Tongue blades (2) <input type="checkbox"/> Tube of petroleum jelly <input type="checkbox"/> Safety pins <input type="checkbox"/> Cleansing agent/soap <input type="checkbox"/> Disposable medical gloves (1 box) <input type="checkbox"/> Sunscreen <p><u>Non-prescription Drugs</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Aspirin or non-aspirin pain reliever <input type="checkbox"/> Anti-diarrhea medication <input type="checkbox"/> Antacid (for stomach upset) <input type="checkbox"/> Laxative <p><u>Action Items</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Develop a family disaster plan including where to meet if separated, name and number of out-of-area contact, kinds of information to give the contact in an emergency. <input type="checkbox"/> Arrange for someone to help your

	<p>each)</p> <ul style="list-style-type: none"> <input type="checkbox"/> Scissors <input type="checkbox"/> Tweezers <input type="checkbox"/> Needle <input type="checkbox"/> Moistened towelettes <input type="checkbox"/> Antiseptic 	<p>family if you are unavailable or at work.</p> <ul style="list-style-type: none"> <input type="checkbox"/> Keep a spare full bottle of propane for grill, if needed. <input type="checkbox"/> Keep fuel/oil for chain saw, camping lanterns, generator, if needed.
3	<p><u>Food</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Water (1 gal/person x 7 days) <input type="checkbox"/> Ready-to-eat canned meats, fruits, vegetables (1 can/person x 7 days) <input type="checkbox"/> Canned juice, milk, soup (if powdered, store extra water) <input type="checkbox"/> Comfort/stress foods—cookies, hard candy, sweetened cereals, lollipops, instant coffee, tea bags. <input type="checkbox"/> High energy foods—peanut butter, jelly, crackers, granola bars, trail mix, dried fruit, nuts. <input type="checkbox"/> Staples—sugar, salt, pepper, spices. <input type="checkbox"/> Vitamins 	<ul style="list-style-type: none"> <input type="checkbox"/> Foods for infants, elderly, special diets. <input type="checkbox"/> If needed: pet food, water (1 gal/pet x 7 days), diapers, feminine hygiene supplies. <p><u>Action Items</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Date perishable items with marker. <input type="checkbox"/> Sign up for First Aid/CPR class. <input type="checkbox"/> Encourage neighbors to develop their plans. <input type="checkbox"/> Place a pair of sturdy shoes, socks, flashlight, whistle, and work gloves in a plastic bag or bin under your bed.
4	<p><u>Clothing, Bedding, Shelter</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Complete change of clothes/footwear per person <input type="checkbox"/> Sturdy shoes or work boots <input type="checkbox"/> Rain gear <input type="checkbox"/> Work gloves <input type="checkbox"/> Hat and thermal gloves <input type="checkbox"/> Thermal underwear <input type="checkbox"/> Sunglasses 	<ul style="list-style-type: none"> <input type="checkbox"/> Blankets or sleeping bags <input type="checkbox"/> Tent <p><u>Action Items</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Identify escape routes from house for all family members. <input type="checkbox"/> Identify safe places to go in case of fire, flood, earthquake, or other local disasters. <input type="checkbox"/> Practice a drill for each plan.
5	<p><u>Food</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Water (1 gal/person x 7 days) <input type="checkbox"/> Ready-to-eat canned meats, fruits, vegetables (1 can/person x 7 days) <input type="checkbox"/> Canned juice, milk, soup (if powdered, store extra water) <input type="checkbox"/> Comfort/stress foods—cookies, hard candy, sweetened cereals, lollipops, instant coffee, tea bags. <input type="checkbox"/> High energy foods—peanut butter, jelly, crackers, granola bars, trail mix, dried fruit, nuts. 	<ul style="list-style-type: none"> <input type="checkbox"/> Staples—sugar, salt, pepper, spices. <input type="checkbox"/> Vitamins <input type="checkbox"/> Foods for infants, elderly, special diets. <input type="checkbox"/> If needed: pet food, water (1 gal/pet x 7 days), diapers, feminine hygiene supplies. <p><u>Action Items</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Date perishable items with marker. <input type="checkbox"/> Eat/use the supplies from month 1!
6	<p><u>Tools and Supplies</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Utensils, cup, plate, and bowl for each person. <input type="checkbox"/> Battery powered portable radio <input type="checkbox"/> Flashlights (1 per person) <input type="checkbox"/> Spare batteries (as needed) <input type="checkbox"/> Weather radio 	<ul style="list-style-type: none"> <input type="checkbox"/> Matches in a waterproof container <input type="checkbox"/> Aluminum foil <input type="checkbox"/> Assorted plastic containers with lids <input type="checkbox"/> Plastic wrap <input type="checkbox"/> Large plastic food bags <input type="checkbox"/> Signal flare <input type="checkbox"/> Paper, pencil, pen

<ul style="list-style-type: none"> <input type="checkbox"/> Spare cell phone charger/car charger <input type="checkbox"/> Cash or traveler's checks, change <input type="checkbox"/> Utility knife <input type="checkbox"/> Fire Extinguisher, small, ABC type Pliers <input type="checkbox"/> Screwdriver <input type="checkbox"/> Hammer <input type="checkbox"/> Pry bar <input type="checkbox"/> Wrench to shut off gas/water <input type="checkbox"/> Duct Tape <input type="checkbox"/> Heavy cotton or hemp rope <input type="checkbox"/> Safety goggles <input type="checkbox"/> Disposable dust masks <input type="checkbox"/> Compass 	<ul style="list-style-type: none"> <input type="checkbox"/> Sewing kit <input type="checkbox"/> Whistle <input type="checkbox"/> Plastic sheeting <input type="checkbox"/> Map of the area <u>Action Items</u> <input type="checkbox"/> Make sure everyone knows where to find gas and water meter shut-off valves and how to turn them off. <input type="checkbox"/> Attach a wrench near the shut-off so it is there when needed. <input type="checkbox"/> Locate the nearest pay phone. <input type="checkbox"/> Secure water heater, bookcases, computer and other heavy items.
<p>7</p> <p><u>Food</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Water (1 gal/person x 7 days) <input type="checkbox"/> Ready-to-eat canned meats, fruits, vegetables (1 can/person x 7 days) <input type="checkbox"/> Canned juice, milk, soup (if powdered, store extra water) <input type="checkbox"/> Comfort/stress foods—cookies, hard candy, sweetened cereals, lollipops, instant coffee, tea bags. <input type="checkbox"/> High energy foods—peanut butter, jelly, crackers, granola bars, trail mix, dried fruit, nuts. 	<ul style="list-style-type: none"> <input type="checkbox"/> Staples—sugar, salt, pepper, spices. <input type="checkbox"/> Vitamins <input type="checkbox"/> Foods for infants, elderly, special diets. <input type="checkbox"/> If needed: pet food, water (1 gal/pet x 7 days), diapers, feminine hygiene supplies. <u>Action Items</u> <input type="checkbox"/> Date perishable items with marker. <input type="checkbox"/> Eat/use the supplies from month 3!
<p>8</p> <p><u>Special Items</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Assemble an activity box of cards, games, toys. <input type="checkbox"/> If needed: leash/carrier for pet(s) <u>Important Family Documents in waterproof, portable container</u> <input type="checkbox"/> Will, insurance policies, contracts, deeds, stocks and bonds <input type="checkbox"/> Passports, social security cards, immunization records (pets too) <input type="checkbox"/> Medical information <input type="checkbox"/> Bank account numbers <input type="checkbox"/> Credit card account numbers and companies <input type="checkbox"/> Inventory of valuable household goods, important telephone numbers <input type="checkbox"/> Family records (birth, marriage, death certificates) <input type="checkbox"/> Contact information for physician, etc. 	<p><u>For Baby</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Formula <input type="checkbox"/> Diapers <input type="checkbox"/> Bottles <input type="checkbox"/> Powdered milk <input type="checkbox"/> Medications <p><u>For Adults</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Heart and high blood pressure medication <input type="checkbox"/> Insulin <input type="checkbox"/> Batteries for hearing aids <input type="checkbox"/> Prescription drugs <input type="checkbox"/> Denture needs <input type="checkbox"/> Contact lenses and supplies <input type="checkbox"/> Extra eye glasses <p><u>Action Items</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Check with day care or school(s) about disaster plans and contacts.

9	<p><u>Food</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Water (1 gal/person x 7 days) <input type="checkbox"/> Ready-to-eat canned meats, fruits, vegetables (1 can/person x 7 days) <input type="checkbox"/> Canned juice, milk, soup (if powdered, store extra water) <input type="checkbox"/> Comfort/stress foods—cookies, hard candy, sweetened cereals, lollipops, instant coffee, tea bags. <input type="checkbox"/> High energy foods—peanut butter, jelly, crackers, granola bars, trail mix, dried fruit, nuts. 	<ul style="list-style-type: none"> <input type="checkbox"/> Staples—sugar, salt, pepper, spices. <input type="checkbox"/> Vitamins <input type="checkbox"/> Foods for infants, elderly, special diets. <input type="checkbox"/> If needed: pet food, water (1 gal/pet x 7 days), diapers, feminine hygiene supplies. <p><u>Action Items</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Date perishable items with marker. <input type="checkbox"/> Eat/use the supplies from month 5!
10	<p><u>Build Kits for Cars</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Water <input type="checkbox"/> High-protein, high-energy food <input type="checkbox"/> First-aid supplies <input type="checkbox"/> Flashlight/batteries <input type="checkbox"/> Radio/batteries <input type="checkbox"/> Basic sanitation supplies <input type="checkbox"/> Warm clothing <input type="checkbox"/> Sturdy shoes or boots 	<ul style="list-style-type: none"> <input type="checkbox"/> Raingear, hat and gloves <input type="checkbox"/> Paper, pencils/pens <input type="checkbox"/> Compass, whistle, map <p><u>Action Items</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Store items in a backpack or other small, portable container. Protect written documents in plastic sealable bags.
11	<p><u>Food</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Water (1 gal/person x 7 days) <input type="checkbox"/> Ready-to-eat canned meats, fruits, vegetables (1 can/person x 7 days) <input type="checkbox"/> Canned juice, milk, soup (if powdered, store extra water) <input type="checkbox"/> Comfort/stress foods—cookies, hard candy, sweetened cereals, lollipops, instant coffee, tea bags. <input type="checkbox"/> High energy foods—peanut butter, jelly, crackers, granola bars, trail mix, dried fruit, nuts. 	<ul style="list-style-type: none"> <input type="checkbox"/> Staples—sugar, salt, pepper, spices. <input type="checkbox"/> Vitamins <input type="checkbox"/> Foods for infants, elderly, special diets. <input type="checkbox"/> If needed: pet food, water (1 gal/pet x 7 days), diapers, feminine hygiene supplies. <p><u>Action Items</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Date perishable items with marker. <input type="checkbox"/> Eat/use the supplies from month 7!
12	<p><u>Build Kits for School/Work</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Water <input type="checkbox"/> High-protein, high-energy food <input type="checkbox"/> First-aid supplies <input type="checkbox"/> Flashlight/batteries <input type="checkbox"/> Radio/batteries <input type="checkbox"/> Basic sanitation supplies <input type="checkbox"/> Warm clothing <input type="checkbox"/> Sturdy shoes or boots <p><u>Additional items to consider</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Charger for cell phone <input type="checkbox"/> Photo of family, pets, or loved ones 	<ul style="list-style-type: none"> <input type="checkbox"/> Note from family or loved ones <input type="checkbox"/> Extra set of car/house keys <input type="checkbox"/> Photocopy of Drivers license or ID <input type="checkbox"/> Whistle <input type="checkbox"/> Prescription medication <input type="checkbox"/> Contact lens case/solution or spare eyeglasses. <p><u>Action Items</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Store items in a backpack or other small, portable container. Protect written documents in plastic sealable bags.

More resources on the Mukilteo Fire Emergency Preparedness page:
<http://mukilteowa.gov/departments/fire/emergency-preparedness/>