



# Slaughterville Fire Department

## Storm Shelter Locations

NAME \_\_\_\_\_

PHYSICAL ADDRESS \_\_\_\_\_

Location \_\_\_\_/4 \_\_\_\_/4 \_\_\_\_/4 Sec. \_\_\_\_ T \_\_\_\_ R \_\_\_\_

PHONE # \_\_\_\_\_ CELL # \_\_\_\_\_

Secondary Contact Name \_\_\_\_\_

Secondary Contact Phone \_\_\_\_\_ Cell Ph. \_\_\_\_\_

\_\_\_\_ Above Ground      \_\_\_\_ Below Ground      \_\_\_\_ Inside Outside

GPS Coordinates: \_\_\_\_\_

Longitude \_\_\_\_\_ Latitude \_\_\_\_\_

Notes: \_\_\_\_\_

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

Draw a sketch/map of the house and the location of the storm shelter.

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W		E
	S	