Ready Your Business

Business Continuity Planning Guidebook

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About *Ready Georgia*

Ready Georgia is a statewide campaign designed to educate and empower Georgians to prepare for and respond to natural disasters, pandemic outbreaks, potential terrorist attacks and other large-scale emergencies. Launched in 2008, the campaign is a project of GEMHSA and provides a local dimension to *Ready America*, a broader national campaign. *Ready Georgia* aims to prepare citizens for maintaining self-sufficiency for at least 72 hours following an emergency, and uses an interactive website, free mobile app, broadcast and print advertising and public awareness media messaging to reach its audiences. *Ready Georgia* is also on Facebook and YouTube.

A Message from Nathan Deal, Governor

Dear Fellow Georgian,

Thank you for your support of the *Ready Georgia* campaign by partnering with us through Ready Your Business. Please review this resource to help you and your business prepare for unexpected emergencies.

Natural or manmade disasters can occur with little or no warning and last much longer than anticipated, as we saw with the snowstorm this January that affected 70 percent of the state. Businesses with continuity plans and the resources to keep working were able to minimize losses and stay productive.

We ask that you as a business leader in Georgia help us prepare by engaging in the activities outlined in this booklet. Preparation is key. Your customers and employees depend on you to keep our economic engines turning, even in the face of a disaster, so please commit to *Ready Georgia* today.

If you have any questions about *Ready Georgia*, please contact us at ready@ready.ga.gov. To learn more about the campaign or to download this booklet, visit www.ready.ga.gov.

Sincerely,

Nathan Deal
Governor, State of Georgia

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A Message from Jim Butterworth, GEMHSA Director

Dear Business Leaders,

State officials and the Georgia Emergency Management & Homeland Security Agency take emergency preparedness very seriously. Every day we work to protect our state and its citizens from disasters, but we can't do it alone. That's why we're asking you – our business community leaders – to help us educate and engage employees in the business continuity process. The materials supplied in this guide will help inform you and your employees about the relevance of emergency preparedness and empower you and your business to take the necessary steps to protect yourself should an unexpected disaster occur.

Our research indicates that almost 87 percent of Georgians are not prepared, so the "Ready" message is relevant to our state's economy, your business and your employees. Together, through awareness, education and action we can minimize vulnerabilities and ensure the protection of our businesses and our citizens.

Sincerely,

Jim Butterworth
GEMHSA director

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A Message from Business Executives for National Security

Dear Business Leader,

BENS – Business Executives for National Security – is committed to enhancing the security of our homeland through active participation of business and industry in preparedness activities. The BENS members in our Southeast Region encourage all of the private sector to continually review and enhance readiness plans. After all, the government cannot perform this task alone. Many of the resources needed to respond to and recover from disasters – both natural and man-induced – are in the hands of the private sector.

The *Ready Georgia* campaign and this guide are excellent resources in this important endeavor. The insights and practical information included will serve as a refresher on the key steps that will keep your business in business and protect your employees and their families.

Sincerely,

Conrad H. Busch, Jr., APR
Director
Southeast Region
Business Executives for National Security

GEORGIA CHAMBER

A Message from the Georgia Chamber of Commerce

Dear Friends,

The Georgia Chamber of Commerce is proud of the role we play — advocating on behalf of the business community in order to protect our state's enviable pro-business environment. As part of these efforts, we support *Ready Georgia* and its mission to engage both businesses and residents in the state's emergency preparedness process.

As many of us experienced during the snowstorm this January, disasters can take a huge toll on business and industry. Fortunately, experience shows us that businesses that prepare in advance are impacted less and able to recover more rapidly from these events. We encourage all Georgia businesses to prepare. It is an important way to ensure our state's continued economic growth.

This guide will take you through the process of making sure your business is fully prepared for debilitating emergency. We hope it serves as a valuable resource and reference for you. Together, we can ensure that employers can help both their employees and customers create a safer and more efficient business community.

Sincerely,

Chris Clark

Doug Carter | Chris Clark
2011 Chair   President & CEO

www.gachamber.com

233 Peachtree Street NE, Suite 2000 | Atlanta, Georgia 30303-1564 | Phone: 404.223.2264 | Fax: 404.223.2290

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PLANNING FOR SUCCESS

Every year emergencies take their toll on business and industry. These unplanned events can cause deaths or significant injuries to employees, customers or the public. Georgians can limit the impact on their business from major interruptions that could disrupt normal operations.

By following this guide's **12 Point Program,** you can **Ready Your Business** against potential emergencies such as:

❖ Fire
❖ Hazardous or Chemical release incident
❖ Flood or Flash Flood
❖ Winter or Severe Storm
❖ Earthquake
❖ Communications Failure
❖ Radiological or Explosive accident
❖ Bomb Threat - Civil Disturbance
❖ Loss of Key Supplier, Customer or Employee
❖ Data Loss or Compromise
❖ Pandemic Influenza
❖ Terrorist Event – Foreign or Domestic

The **Ready Your Business** guide can be used by small or large organizations in any industry. It is intended to assist the planner who may not have in-depth knowledge of emergency management or continuity planning.

For further information about how to prepare for natural or human-caused disasters or to request a speaker to present to your employees or association members on business, family or individual preparedness, visit www.ready.ga.gov.

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BUSINESS CONTINUITY PLAN

Legally Registered Business Name:

D.B.A.

Local Address:

City, State, Zip:

Telephone Number / Website:

After Hours Emergency Number:

Corporate Headquarter Address:

City, State, Zip:

Point of Contact:

Telephone Number / Email:

After Hours Emergency Number:

Primary Contact Person (1): (will serve as the company spokesperson in an emergency)

Address:

City, State, Zip:

Phone Number / Email:

☐ Assumes command

☐ Assess the situation

☐ Activate emergency procedures

☐ Coordinates employee communications

☐ Other – Describe:

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1 Creating a Planning Team / Continuity of Authority

The following people will participate in emergency planning and crisis management.

❖ Team Leader: / Emergency Manager (Name /Title/Department)

❖ (Name /Title/Department)

❖ (Name /Title/Department)

❖ (Name /Title/Department)

A preferred chain of authority will consist of one primary and two alternates per position. If the Primary Emergency Manager is unable to manage the crisis, the person below will succeed in management:

Alternate Contact Person (2):

Address:

City, State, Zip:

Phone Number/Email:

☐   Assumes command

☐   Assess the situation

☐   Activate emergency procedures

☐   Coordinates employee communications

☐   Other/ Describe:

If Alternate Contact is unable to manage the crisis, the person below will succeed in management:

Alternate Contact Person (3):

Address:

City, State, Zip:

Phone Number/Email:

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☐ Assumes command

☐ Assess the situation

☐ Activate emergency procedures

☐ Coordinates employee communications

☐ Other/ Describe:

If Alternate Contact is unable to manage the crisis, the person below will succeed in management:

Alternate Contact Person (4):

Address:

City, State, Zip:

Phone Number/Email:

☐ Assumes command

☐ Assess the situation

☐ Activate emergency procedures

☐ Coordinates employee communications

☐ Other/ Describe:

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#2 COMMUNICATIONS

Dial 9-1-1 in an Emergency for Local or Isolated Emergencies

Local Police:

Local Fire:

Local Ambulance Service:

Hospital (Insurance Preferred):

Hospital (closest):

Insurance Provider/Agent: (Policy Number, Headquarter Phone/Contact)

Telephone Company:

Gas/Heat Company:

Electric Company:

Water Company:

Building/Property Manager:

Building Security:

Georgia Division of Homeland Security: (404) 635-7000

Local SBA Small Business Administration Office:

Federal Emergency Management Regional Office (FEMA)
District IV
3003 Chamblee Tucker Road
Atlanta, GA 30341

Phone: (770) 220-5200

Media:

    Newspaper

    Radio:

    Television:

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A communication plan should address the requirements for controlling and communicating information. Maintain an up-to-date list of phone numbers, computer and internet login codes and passwords, email addresses, employee phone numbers and other critical information in a secure, but easily accessible, location.

Messages for public release to the media can be prepared and scripted for clarity and uniformity in the information that is distributed. Careful consideration should be made to the person(s) assigned as the official media contact or Public Information Officer (PIO) for the organization.

Media Spokesperson / Public Information Officer:

Communication Priorities:

Internal Communications: Refer to Continuity of Authority Plan

      1. _____

      2. _____

      3. _____

Inbound and/or Outbound Communication Priorities

    Consider methods for **inbound** calls from: patients, customers, members, vendors and etc

    Consider methods for **outbound** communications for: employee notifications, customer updates, status reports and etc.

Communication Methods:
We will utilize these communication methods and provide any necessary training to key personnel.

- ❑ Traditional Telephone Landline (not dependant on electrical power for operation)

- ❑ Call Forwarding
  Identify the method, equipment needed, individual assigned to perform this function and any other critical planning component.

  - o Cell Phone
    - ▪ Call Forward to: _____
    - ▪ Number: _____
  - o Secondary Location
    - ▪ Call Forward to: _____
    - ▪ Number _____
  - o Off-site Backup System
    - ▪ Call Forward to: _____
    - ▪ Number _____
  - o Voice Mail
    - ▪ Message Script _____
- ❑ Fax Line
    - ▪ Number: _____

- ❑ Toll-Free
    - ▪ Number: _____

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- ❏ Internet Service:
    - o Website for Emergency information: _____
    - o Email / Instant Messaging : _____

- ❏ Two-Way Radio
    - o Assigned to:
        - ▪ _____
        - ▪ _____
    - o Radio Frequency:
        - ▪ _____
        - ▪ _____

- ❏ Satellite Phone:
    - o Assigned to:
        - ▪ _____
        - ▪ _____
    - o Number(s)
        - ▪ _____
        - ▪ _____

- ❏ SMS/Text

- ❏ Pager

- ❏ Calling Tree
    Use for employee notifications and as a communication tool to maintain contact with key vendors, suppliers and customers.

    - ▪ Divide your employees into groups
        - o by home location
        - o work assignment or department

Inbound Name / Group	Contact Information: Phone, Cell, Email	Communication Method

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#3 IDENTIFY RISKS/HAZARDS

Considering factors from these areas, the following events could impact our business: Create a plan based on the probability of each risk/hazard.

- ❖ Historical / Geographic
- ❖ Technological / Cyber
- ❖ Human Error / Health / Disruption in leadership….
- ❖ Loss of key customer or vendor
- ❖ Physical
- ❖ Regulatory
- ❖ Natural
- ❖ Power/Gas/Water

Business Interruption	Impact on Operations	Possible Responses

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#4 INTERNAL RESOURCES AND CAPABILITIES / EXTERNAL RESOURCES

These resources are available internally to assist with emergency planning, response and recovery.
Create a list of backup systems such as equipment, data, employee training (cross training), communications that can be identified as a resource for planning, response or recovery.

- ❖ Equipment:
- ❖ Facilities:
- ❖ Organizational:
  - Training
  - Evacuation Plan
  - Employee Support Systems
  - Other / Describe:

Business Interruption	Impact on Operations	Possible Responses

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Type of Resource	Location / Department	Point of Contact

Resources are available externally to assist with emergency planning, response and recovery:
Identify the type of EXTERNAL resource and provide a contact list for planning

- ❖ SBA / Small Business Development Center
- ❖ Disaster Recovery Specialist
- ❖ Trade Associations
- ❖ First Responders – Fire, Law Enforcement
- ❖ Utilities
- ❖ Industry, business, financial, insurance
- ❖ Infrastructure / Communications
- ❖ Transportation
- ❖ Federal, State, regional and local governments
- ❖ Trade associations
- ❖ Media
- ❖ Academic community (universities)
- ❖ Community/faith-based organizations

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Organization/ Type	Resource Available	Point of Contact

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#5 VULNERABILITY ASSESSMENT

Complete the "Vulnerability Assessment" chart using a ranking system of 5 to 1. Total each column, the LOWER the score- the better.

1. Select a minimum of three risks/hazards to complete the assessment.

2. Estimate the probability based on historical and other known facts.

3. Assess the potential human impact by estimating the possibility of death or injury.

4. Assess the potential property impact considering the potential losses and damages

    a. Cost to replace
    b. Cost to set up temporary replacement
    c. Cost to repair

5. Assess the potential business impact considering:

    a. Business interruption
    b. Employees unable to report to work
    c. Customers unable to reach the facility
    d. Company in violation of contractual agreements
    e. Imposition of fines and penalties or legal costs
    f. Interruption of critical supplies
    g. Interruption of product distribution

6. Assess Internal and External Resources

    a. Do we have the needed resources and capabilities to respond?
    b. Will external resources be able to respond to us for this emergency as quickly as we may need them, or will they have other priority areas to serve
    c. Total the Columns

Information gathered from the Vulnerability Assessment could be used to complete portions of the risk/hazard, internal and external resources and capabilities sections of the plan.

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VULNERABILITY ASSESSMENT WORKSHEET

Type of Risk/Hazard	Probability	Human Impact	Property Impact	Business Impact	Internal Resources	External Resources	TOTAL	Probability X Total
	High Low 5 →← 1	High Impact 5 →← 1 Low Impact			Weak 5 →← 1 Strong Resources		Weighted Measure for Planning	

- ❖ What are the most critical and time sensitive business functions?

  - o Overall

  - o By department / area

- ❖ How much down time can be tolerated for each identified business function?

- ❖ Which business functions are necessary to fulfill my legal and financial obligations and maintain cash flow?

- ❖ Which business functions are essential to maintain my market share and reputation, or to strategically adjust to changed circumstances?

Complete for EACH function in every department

Business Function: _____

Priority:　　　☐ HIGH　　　☐ MEDIUM　　　☐ LOW

Employee in Charge:

Timeframe or Deadline:

Money Lost or Fine Imposed if not done:

Who performs this function? List all that apply.

Employee (s):

Vendor (s):

Key Contacts:

Who provides the input to those who perform the function? List all that apply.

Employee(s):

Vendor(s):

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Key Contacts:

- Make a list of all Essential Functions
- Conduct interviews with each function manager
- Identify loss potential of not performing the function
- Classify Functions
    - Mission Critical
        - Directly tied to profits
        - Crucial to the success of business continuity
    - Business Critical
        - Necessary to resume Mission Critical
        - Supports normal operations
    - Customer Critical
        - Product / service to meet customer expectation or perception
        - Provide updated information
- Assign KEY PERSONNEL responsible to recover each function
- Determine recovery timeframe to meet business or regulatory requirements per function

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Business Functions Worksheet

Essential Function	Loss Potential	Function Classification	Recovery Personnel

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MISSION ESSENTIAL FUNCTION SURVEY

Mission Essential Function	Critical Restoration Time	Minimum Staff Required	Business Critical Human, Equip & Supply Resources Available	Additional Resources Needed	Space Required at Alternate Facility	Name/Phone of KEY Response Person

Survey Questions
1. List your mission critical activities or functions in priority order
2. For each mission critical function identify the critical restoration time period (e.g., 24 hours, 3 days, 2 weeks, etc)
3. Identify the minimum of staff needed to operate (possibly at an alternate facility) for each mission critical function
4. Identify resources available for this function (possibly to be moved to an alternate facility)
5. Identify any additional resources needed for each mission critical function (partly to help determine space requirements at alternate facility)
6. If planning to use an alternate facility, specify amount of space required
7. Identify by name, position and telephone number the KEY person responsible for each function

Source: Tampa Bay Regional Planning Council (adapted)

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ESSENTIAL BUSINESS SUPPORT SERVICES:

VOICE/DATA COMMUNICATIONS

Type of Service:

☐ Telephone   ☐ Fax Machine   ☐ PC Data Communications

☐ Two-way Radio & Pager   ☐ Cell Phone   ☐ PBX w/ACD

☐ Other Explain:

(Private Branch Exchange w/Automatic Call Distribution)

Description and Model:

Status: ☐ Currently in use   ☐ Will lease/buy for recovery location

Voice Communications Feature:

☐ Voice Mail   ☐ Conversation Recorder   ☐ Speaker   ☐ Conference

☐ Other Explain:

Data Communications Features:

☐ Cable   ☐ DSL   ☐ Dial-UP ☐ T-1

☐ Other Explain:

Quantity:

Primary Supplier/Vendor:

Alternate Supplier/Vendor:

Recovery Install Location: Now identify "types" of training and / or drills that would benefit your employees and organization. **Complete Training Drills and Exercises** – annual planning calendar and distribute to KEY responders and employee

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REMOTE ACCESS

Remote work plans provide one of the best solutions to maintaining productivity during emergencies. It is important to make sure remote access systems that are set up for everyday operations are also reliable in emergency situations as well.

- ❖ **Contacts**
  - o Internal Contacts
    - ▪ Name & Contact Info:
    - ▪ Name & Contact Info:
  - o External Contacts
    - ▪ Name & Contact Info:
    - ▪ Name & Contact Info:

- ❖ **System**
  - o Type:
  - o Location:
  - o Bandwidth Capacity:
    - ▪ Expected bandwidth usage during/after large scale disaster:
  - o Backup Power Capabilities:
  - o Login Names/Passwords:

  - o Instructions for Access:

- ❖ **Personnel**
  - o Positions Prepared for Remote Access:
    - ▪ Percentage of workforce with home access:
    - ▪ Percentage of workforce with mobile access:
  - o Management Trained for Remote Supervision:
  - o Employee Tech Support Contact:

- ❖ **Security**
  - o Remote Security Tools in Place:

  - o Differences Between Regular and Remote Systems:

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EQUIPMENT/MACHINERY/VEHICLES

Include tools and spare parts to operate equipment required to perform **essential business functions**.

Item:

Model:

Serial Number or Part Number:

Status: ☐ Currently in Use ☐ Will lease/buy for recovery location

Primary Vendor/Supplier:

Alternate Vendor/ Supplier:

Recovery location for installation or delivery:

Related business function:

Backup Available: ☐ Yes ☐ No

Order or lead-time for replacement:

Item:

Model:

Serial Number or Part Number:

Status: ☐ Currently in Use ☐ Lease/buy for recovery location

Primary Vendor/Supplier:

Alternate Vendor/ Supplier:

Recovery location for installation or delivery:

Related business function:

Backup Available: ☐ Yes ☐ No

Order or lead-time for replacement:

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#7 HUMAN RESOURCES – EMPLOYEE/OWNER CONTACT

Name:

Call Order or Key Person #

Position / Department:

Key Responsibilities:

Shift / Schedule:

Miles from Home:

Home Address:

City, State, Zip:

Cell Phone:	Home Phone:
Office Phone:	Fax/Other:
Home Email:	Office Email:
Emergency Contact:	Relationship:
Emergency Contact Phone:	Alt. Phone

PHOTO
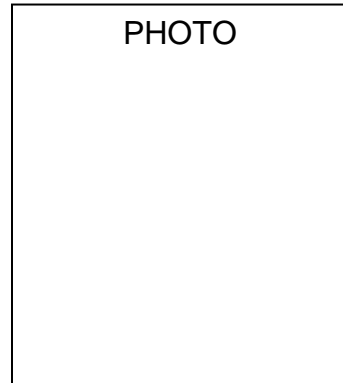
OUT OF STATE EMERGENCY CONTACT

Emergency Contact:	Relationship:
Emergency Contact Phone:	Alt. Phone

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Certifications/Training/Resources:

☐	First Aid / CPR	☐	Other Language(s)
☐	Emergency Medical Technician (EMT)	☐	HAM Radio
☐	Military	☐	CERT
☐	Other:	☐	4x4 or off road vehicle

Special Needs – (Voluntary Disclosure):

EMPLOYEE EMERGENCY CONTACT INFORMATION

The following is a list of co-workers and individual emergency contact information: Include an **OUT OF STATE** emergency contact number for each employee.

Co-worker	Emergency Contact Information	Co-worker	Emergency Contact Information

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EMPLOYEE SUPPORT

Services to consider for employee support after an emergency:

❖ Cash advances

❖ Salary continuation

❖ Flexible work hours

❖ Reduced work hours

❖ Crisis counseling

❖ Care Packages

❖ Child Care

❖ Temporary Family Housing

EMPLOYEE TRAINING

We will communicate our emergency plans with co-workers /employees:

☐ New Hire Orientations

☐ Train Evacuation, Assembly, Shelter, All Clear and Shutdown Managers

☐ Cross-train on equipment processes – introduce new equipment

☐ Provide employees with information to develop a family preparedness plan

☐ Establish an Emergency "call-in" number

☐ Test the "call down" tree network

In the event of a disaster we will communicate with employees in the following way. (Prioritize all **facility communications** and determine which should be restored first in an Emergency):

____ Messenger	____ Dial-up Modems
____ Telephone/Cell Phone	____ Local Area Networks (LANS)
____ Two-way Radio	____ Hand Signals
____ FAX Machine	____ HAM Radio
____ Microwave / Satellite	____ Text Messaging

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DRILLS / TRAINING / EXERCISE SCHEDULE

20__	Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec
Fire/Evacuation Drill												
Employee Orientation/Review												
Management Orientation/Review												
Department Tabletop Exercise												
Response Team Tabletop Exercise												
Emergency Call Down Procedures												
Walk-through Drill												
Functional Drill												

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#8 EVACUATION PLAN FOR {*insert address*} LOCATION

☐ We have developed plans in collaboration with neighboring businesses and building owners to avoid confusion or gridlock.

☐ We have located copied and posted building and site maps.

☐ Exits and Evacuation routes are clearly marked.

☐ We will practice evacuation procedures _____ times per year

☐ We have identified conditions which an evacuation is necessary

☐ Established procedures to account for non-employees/suppliers/customers/clients

☐ Building Evacuation Wardens have been identified and trained

☐ Designated personnel to continue or shut down essential operations while an emergency is underway with the ability to recognize when to abandon a given task.

If we must leave the workplace quickly:

_____

_____

WARNING SYSTEM
Type / Procedure:

_____

We will test the warning system and record results _____ times a year.

EVACUATION MANAGER:

Alternate Evacuation Manager:

Responsibilities Include:

Assembly Area:

ASSEMBLY AREA MANAGER:

Alternate Assembly Area Manager:

Responsibilities Include:

ALL CLEAR SIGNAL:

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ALL CLEAR MANAGER:

    All Clear Alternate Manager:

    Responsibilities Include:

CRITICAL DATA MANAGER:

    Alternate Critical Data Manager:

    Responsibilities Include:

EVACUATION "GO BOX" – Contents stored in a fire-proof/ waterproof secure container.

☐ Copy of emergency contact list of employees and key customers/clients including all phone

numbers.

☐ Voice mailbox # and remote password information and instructions so you can change messages as needed providing information to employees so they can call in for instructions.

☐ Copy of insurance policies, agent and home office contact information

☐ Copy of emergency vendors (contractors, plumbers, electricians, restoration contractors, etc). Verify emergency payment arrangements.

☐ Credentials or authorization to re-enter the workplace or relocation area

☐ Back up files / tapes of electronic data

☐ Copy of essential policies, emergency procedures, Business Continuity Plan ..

☐ Pictures of the facility – inside and out. This includes home-based businesses.

☐ Documentation required for an **SBA Disaster Loan** or other type of assistance that might become available and may include (consult a local SBA Loan Professional)
  - o Corporations/Partnerships: Copy of 3 years tax returns / 1 year personal tax returns on principles (Affiliates with greater than 20% interest) 1 year tax return on affiliated business entity.
  - o Sole Proprietorships: Copy of 3 years tax returns with Schedule C
  - o Copy of Current Profit and Loss Statement (within 90 days) and recent Copy of Balance Sheet
  - o Copy of Listing of aged accounts receivables/payables
  - o Copy of Listing of Inventory
  - o Copy of Schedule of Liability

SHELTER–IN-PLACE PLAN FOR (INSERT ADDRESS)

☐ We have talked to co-workers about which emergency supplies, if any, the company will provide in the shelter location and which supplies individuals might consider

☐ We will practice sheltering procedures _____ times per

If we must leave the workplace quickly:

_____

WARNING SYSTEM Type / Procedure:

_____ __

We will test the warning system and record results _____ times a year.

STORM SHELTER LOCATION:

"Seal the Room" Shelter Location:

SHELTER MANAGER:

Alternate Shelter Manager:

Responsibilities Include:

ALL CLEAR MANAGER:

Alternate All Clear Manager:

Responsibilities Include:

FACILITY SHUTDOWN
What conditions necessitate a shutdown? Who is authorized to order a shutdown?

SHUTDOWN MANAGER:

Alternate Shutdown Manger:

Responsibilities Include:

RECOVERY LOCATION

Recovery Location:

Street Address:

City, State, Zip:

Building Owner/Manager:

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Phone: Alternate Phone:

Email: Pager:

Directions to recovery location (include map if available):

Business functions to be performed at recovery location:

Employees who should go to recovery location:

If this location is not accessible we will operate from location below:

Alternate Location Name:

Address:

City/State/Zip:

Telephone Number / Email:

Security Badges / Access Codes required for alternate location Procedure for security processing
** Maintain a copy of the alternate/recovery location's lease/rental agreement or occupancy details as part of this plan

RECOVERY LOCATION SUPPLIES

Supply items that are necessary for essential equipment such as cartridges, fluids, special forms and checks that may be available at a recovery location

Item	Item Order Number	Quantity	Supplier/Vendor	Related Business Function

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MISCELLANEOUS RECOVERY LOCATION RESOURCES

Item	Quantity	Primary Supplier/Vendor	Alternate Supplier/Vendor	Recovery Install Location
Chairs				
Desks				
Extension/ drop cords, surge protectors and power strips				
File Cabinets				
Mail Containers				
Portable air conditioners/ fans				
Safes				
Tables				
Waste Baskets				
Other				

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9 WORKPLACE EMERGENCY SUPPLY LIST

Indicate who is responsible for maintaining the suggested item(s) at the workplace.
Preferred: One complete 72-hour kit per every five (5) employees

CAR SURVIVAL AND EMERGENCY SUPPLY LISTS:

- ❑ Maintain a minimum of one half tank of gas
- ❑ Tools needed to change a flat tire
- ❑ Jumper cable
- ❑ Road emergency flares
- ❑ Collapsible shovel
- ❑ Flashlight with extra batteries or hand crank
- ❑ Coat(s) or Jacket(s)
- ❑ Blanket(s) – (can be Mylar)
- ❑ Rubber disposable gloves
- ❑ Whistle (equipped to hang around neck)
- ❑ Fire extinguisher (Standard Class ABC)
- ❑ Water: store in clear liter bottles (filled ¾ full to allow for freeze expansion) Rotate water every six months. Secure for safety
- ❑ Food/Power Bar(s)
- ❑ Compass
- ❑ Siphoning hose
- ❑ Bag of sand or rock salt
- ❑ Tow rope
- ❑ Personal sanitation items (toilet tissue, towelletes)
- ❑ Writing pad, pencils, road map
- ❑ Ice scraper
- ❑ Rain poncho
- ❑ Light stick
- ❑ Dust mask
- ❑ Maintain vehicle(s) for seasonal changes

First Aid Kit
- o Band aids, gauze, non-adherent sterile pads (various sizes), first aid tape
- o Anti-bacterial ointment and burn cream
- o Scissors, tweezers, pocketknife, razor blades
- o Large cotton cloth (use for sling, tourniquet, bandage)
- o Non-aspirin pain reliever
- o Chemical ice pack, hand warmer packets
- o Safety pins (various sizes) needles, heavy thread
- o Matches (waterproof)
- o Eye wash
- o Hand wipes (antiseptic) cotton balls, cotton pads
- o Alcohol swabs, iodine (bottle or pads)
- o Prescription medications

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Company	Employee	Supply Item
		WATER. Amounts for portable kits will vary. Individuals should determine what amount they are able to store comfortably and transport to other locations. **If feasible, store 1 gallon of water per person per day** for drinking and sanitation. Store in plastic or use commercially bottled water
		FOOD and UTENSILS, at least one to three-day supply of non-perishable food that could include ready-to-eat meats, juices, high-energy foods such as granola or power bars.
		NOAA WEATHER ALERT BATTERY-POWERED RADIO and extra batteries. **AM/FM Radio or Hand Crank Powered**
		Working **SMOKE DETECTORS, FIRE EXTINGUISHER, CARBON MONOXIDE DETECTOR**
		BLANKETS/PILLOWS/SLEEPING BAG
		FLASHLIGHT and extra batteries or hand Crank / **LIGHT STICKS**. Do not use candles/open flame during an emergency
		WHISTLE for emergency signal. Ready to hang around neck.
		DUST or FILTER MASKS, readily available in hardware **N95 mask** recommended for preventing inhalation of airborne particles.
		MOIST TOWELLETES or BABY WIPES for sanitation
		TOOLS - WRENCH or PLIERS to turn off utilities, **BROOM, SHOVEL, HAMMER** and **WORKING GLOVES**
		CAN OPENER for food (if kit contains canned items)
		PLASTIC SHEETING and **DUCT TAPE** to seal the room for sheltering in place
		MEDICATIONS to include prescription and non-prescription medications such as pain relievers, stomach remedies and etc.
		FIRST AID SUPPLIES An assortment of bandages, ointments, gauze pads, cold/hot packs, tweezers, scissors and sanitizer
		PERSONAL HYGIENE items to include at least one **CHANGE OF CLOTHING / SHOES / OUTERWARE**. **GARBAGE BAGS** and plastic ties for personal sanitation
		PAPER SUPPLIES note pads, markers, pens, pencils, plates, napkins, paper towels and etc.
		CAMERA -disposable camera to record damage
		CASH/ATM and CREDIT CARD - Keep enough cash for immediate needs in small denominations
		EMERGENCY CONTACT PHONE LIST
		MAP and OTHER

#10 INSURANCE COVERAGE REVIEW

Insurance Agent:

Address:

Phone   Fax:

Cell: Email:

HEADQUARTERS CONTACT:

Address:

Phone   Fax:

Cell: Email

Type of Insurance	Policy No.	Deductibles	Policy Limits	Coverage (General Description)

Insurance Policy Information

Do you need flood insurance?

Do you need Earthquake Insurance?

Do you have Business Income, Extra Expense or Interruption Insurance?

Consider Business Owners Protection or Key Person

Other:

Date Reviewed with Provider:

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11 VITAL RECORDS

Record all documents that are vital to perform your **essential business functions** or necessary to file an insurance claim or apply for a business recovery loan.

Name of Vital Record: _____

Stored Media:

☐ Network ☐ Print Version ☐ Hard Drive ☐ Laptop

☐ Microfilm ☐ Internet ☐ CD ☐ Diskette

☐ Other Explain: _____

Is Record backed up? ☐ Yes ☐ No

Backed up Media:

☐ Network ☐ Print Version ☐ Hard Drive ☐ Laptop

☐ Microfilm ☐ Internet ☐ CD ☐ Diskette

☐ Other Explain: _____

How often is it backed up?

☐ Hourly ☐ Daily ☐ Weekly ☐ Monthly

☐ Quarterly ☐ Semi-Annually ☐ Yearly

☐ Never Explain: _____

Where is it stored?

Remote access available?

Essential Business function it supports:

Business Interruption	Impact on Operations	Possible Responses
You cannot get to your facility (e.g., road is blocked)	No Operations	
Utility service is down (e.g., no power, or water)	Depending on your operations and facility, your operations may be completely shut down or limited	
	You may have to send your staff home with/without pay	
	You may be able to notify your customers and continue to receive supplies	

VITAL INFORMATION MANAGEMENT:

Financial

- ☐ Copy of all bank account numbers and their balances
- ☐ Copy of all CD account numbers and balances
- ☐ Income tax returns for (3) years for both the business and each principal
- ☐ Business financial statements – balance sheet, income statement, reconciliation of net worth for last (3) years
- ☐ Accounts Receivable information
- ☐ Employee insurance information
- ☐ Business insurance information
  - o All leased and company vehicles
  - o All equipment insurance
    - ▪ Extended warranties and/or policies
- ☐ 401-K information
- ☐ Resumes of principals and managers
- ☐ Business account information
  - o Account numbers & company contact telephone numbers
    - ▪ Telephone
    - ▪ Electric (any utility your office receives service from)
    - ▪ Company credit cards
    - ▪ All customers
    - ▪ All vendors

Contractual
- ☐ Copy of any contracts between your company and another entity
- ☐ Copy of building lease
- ☐ Copy of any equipment leases
  - o All leased and company vehicles
  - o Copier
  - o Postage machine
  - o Telephones or other leased items
- ☐ Copy of City, County and any State business licenses
- ☐ Copy of Company By-laws
- ☐ Copy of Employee Handbook
- ☐ Copy of any current company Strategic or Business Plan

Sole Proprietorships, Corporations and Partnerships all need the following:
- ☐ Copy of current Profit & Loss Statement, Balance Sheet (current within 90 days)
- ☐ Copy of listing of inventory
- ☐ Copy of Schedule of Liability
- ☐ Copy of all of your required licenses (City, Occupational, Sales Tax, Federal ID…)
- ☐ Copy of Articles of Incorporation /Corporate Charter
- ☐ Resolution of Board of Directors or Partnership
- ☐ Partnership agreements if applicable
- ☐ Other:
  - • Schedule of debts, Affiliates, Franchise agreement
  - • Federal Trade Commission report

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CRITICAL TELEPHONE NUMBER LOG

Phone Number	Type	Status	Description	Solution	Related Business Function

Type
L   Local
LD   Long Distance

800   Toll Free
F   Fax
C   Cell
O   Other

Status
C   Currently in use
E   Establish for use during
            recovery

Description
Hotline, mail line, toll free, customer service, dial-in to network etc.

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KEY SUPPLIER / VENDOR INFORMATION

Status:　　☐ Current Supplier/Vendor　　☐ Back Up Supplier/Vendor

Company Name:

Account Number (if relevant):

Materials/Service Provided:

Street Address:

City, State, Zip:

Company Phone (main):

Primary Contact:　　　　　　　Title:

Primary Contact　　　　　　　Phone:　　　　　　　　Cell:

Primary Contact:　　　　　　　Fax:

Primary Contact　　　　　　　Email:

Alternate Contact:　　　　　　Title:

Alternate Contact　　　　　　Phone:　　　　　　　　Cell:

Alternate Contact　　　　　　 Fax:

Alternate Contact　　　　　　Email:

Website Address:

Recovery Notes:

** Include Major and Secondary Suppliers/Vendors

KEY CONTACTS / CUSTOMERS/ MEMBERS

☐ Accountant   ☐ Administration   ☐ Bank

☐ Billing/Invoicing Service   ☐ Building Manager   ☐ Building Owner

☐ Building Security Creditor ☐ Electric Company   ☐ Emergency Mgmt Agency

☐ Fire Dept (non emerg)   ☐ Gas/Heat Company   ☐ Hazardous Material

☐ Insurance Agent/Broker   ☐ Insurance– CLAIMS   ☐ Key Customer/Client

☐ Local Newspaper   ☐ Local Radio   ☐ Local Television Station

☐ Mental Health/Social   ☐ Police Dept (non emerg) ☐ Public Works Dept

☐ Payroll Processing   ☐ Small Business   ☐ Telephone Company

☐ Other/ Explain:

Name of Business or Service:

Account Number / Policy Number:

Materials/Service Provided:

Street Address:

City/ State/ Zip:

Company/ Service Phone: Alternate Phone:

Primary Contact: Title:

Primary Contact Phone: Cell:

Primary Contact Email: Fax:

Alternate Contact: Title:

Alternate Contact Phone: Cell:

Alternate Contact Email: Fax:

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EQUIPMENT/MACHINERY/VEHICLES

Include tools and spare parts to operate equipment required to perform essential business functions.

Item:

Model:

Serial Number or Part Number:

Status: ☐ Currently in Use ☐ Will lease/buy for recovery location

Primary Vendor/Supplier:

Alternate Vendor/ Supplier:

Recovery location for installation or delivery:

Related business function:

Backup Available: ☐ Yes ☐ No

Order or lead-time for replacement:

Item:

Model:

Serial Number or Part Number:

Status: ☐ Currently in Use ☐ Lease/buy for recovery location

Primary Vendor/Supplier:

Alternate Vendor/ Supplier:

Recovery location for installation or delivery:

Related business function:

Backup Available: ☐ Yes ☐ No

Order or lead-time for replacement:

COMPUTER EQUIPMENT AND SOFTWARE

Item: _____

Type: ☐ Computer Hardware   ☐   Computer Software

Status: ☐ Currently in use   ☐   Lease/buy for recovery location

Primary Supplier/Vendor:

Alternate Supplier/Vendor:

Title and Version or Model Number:

Serial Number: Purchase/Lease Date:

Purchase/Lease Price:

Recovery Install Location:

Quantity (equipment) or number of licenses (software):

License Numbers

Recovery Notes:

_____

COMPUTER HARDWARE INVENTORY

- Log your computer peripheral serial and license numbers. Attach a copy of your vendor documentation to this form
- Record the name of the company from which you purchased or leased this equipment and the contact name of notify for your computer repairs
- Record the name of the company that provides repair and support for your computer peripherals

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Hardware (CPU, Monitor, Printer Keyboard, etc)	Hardware Size RAM & CPU Capacity	Model Purchased	Serial Number	Date Purchased	Cost

COMPUTER HARDWARE VENDOR OR LEASING COMPANY INFORMATION

Company Name

Street Address   City/State/Zip

Phone   Fax   Website/Email

Contact Name

Account Number   Purchase/Lease Date

COMPUTER HARDWARE SUPPORT/REPAIR VENDOR INFORMATION

Company Name

Street Address   City/State/Zip

Phone   Fax   Website/Email

Contact Name

Account Number   Purchase/Lease Date

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COMPUTER SOFTWARE INVENTORY

Software Title & Version	Serial/Product ID Number	No. of Licenses	License Number	Date Purchased	Cost

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COMPUTER SOFTWARE VENDOR OR LEASING COMPANY INFORMATION

Company Name

Street Address

City/State/Zip

Phone

Fax

Website/Email

Contact Name

Account Number

Purchase/Lease Date

COMPUTER SOFTWARE SUPPORT/REPAIR VENDOR INFORMATION

Company Name

Phone

Fax

Website/Email

Contact Name

Account Number

Purchase/Lease Date

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#12 DATA PROTECTION/STORAGE/RECOVERY

To protect our computer hardware

[ ] Secure or mount equipment [ ] other:

_____

To protect our software

[ ] Maintain software updates [ ] Inventory

[ ] sing information [ ]

Restrict unauthorized downloading of new programs other:

_____

To protect our data/network/system

[ ] Firewall / Filters / Intrusion Detection [ ] Spam guard

[ ] Password Protection [ ] Virus detection/prevention software

[ ] Internet content control [ ] Limit access to confidential data

[ ] Remove unused software & User accounts [ ] Other _____

Note: Describe Security / Protection measures to include physical and virtual

RECORDS BACKED-UP

_____ is responsible for backing up our critical records including payroll and accounting systems. Back-up records including a copy of this plan, site maps, insurance policies, bank account records and computer back ups are stored onsite.

Another set of back-up records is stored at the following off-site location:

If our accounting and payroll records are destroyed, we will provide for continuity in the following ways:

RECORDS RECOVERY

_____ is responsible for testing the recovery of backed up files to ensure recovery is possible, reliable and complete.

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CYBER SECURITY CHECKLIST

PHYSICAL SECURITY	Yes	No
1. Is your computing area and equipment physically secured?		
2. Are there procedures in place to prevent terminals from being left in a logged-on state, however briefly?		
3. Are screens automatically locked after 10 minutes idle?		
4. Are modems set to Auto-Answer OFF (not to accept incoming calls)?		
5. Are your PCs inaccessible to unauthorized users (e.g. located away from public areas)?		
6. Does your staff wear ID badges?		
7. Do you check the credentials of external contractors?		
8. Do you have procedures for protecting data during equ8pment repairs?		
9. Is waste paper binned or shredded?		
10. Do you have procedures for disposing of waste material?		
11. Do your policies for disposing of old computer equipment protect against loss of date (e.g.. by reading old disks and hard drives)?		
12. Do you have policies covering laptop security (e.g. cable lock or secure storage)?		
ACCOUNT AND PASSWORD MANAGEMENT	Yes	No
13. Do you ensure that only authorized personnel have access to your computers?		
14. Do you require and enforce appropriate passwords?		
15. Are your passwords secure (not easy to guess, regularly changed, no use of temporary or default passwords)?		
16. Are you computers set up so others cannot view staff entering passwords?		
CONFIDENTIALITY OF SENSITIVE DATA	Yes	No
17. Are you exercising responsibility to protect sensitive data under your control?		
18. Is the most valuable or sensitive data encrypted?		
DISASTER RECOVERY	Yes	No
19. Do you have a current business continuity plan?		
SECURITY AWARENESS AND EDUCATION	Yes	No
20. Are you providing information about computer security to your staff?		
21. Are employees taught to be alert to possible security breaches?		

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CYBER SECURITY THREAT ASSESSMENT

Example of a threat checklist using 0-5 rating scales for impact and probability

IMPACT SCALE	PROBABILITY SCALE
1. Impact is negligible	0. Unlikely to occur
2. Effect is minor, major agency operations are not affected	1. Likely to occur less than once per year
3. Agency operations are unavailable for a certain amount of time, costs are incurred. Public/customer confidence is minimally affected	2. Likely to occur once per year
4. Significant loss of operations, significant impact on pubic/customer confidence	3. Likely to occur once per month
5. Effect is disastrous, systems are down for an extended period of time, systems need to be rebuilt and data replaced	4. Likely to occur once per week
6. Effect is catastrophic, critical systems are offline for an extended period; data are lost or irreparably corrupted; public health and safety are affected	5. Likely to occur daily

GENERAL THREATS	Impact (0-5)	Probability (0-5)	Total (Impact x Probability)
Human Error: 1. Accidental destruction, modification, disclosure, or incorrect classification of information 2. Ignorance: inadequate security awareness, lack of security guidelines, lack of proper documentation, lack of knowledge 3. Workload: Too many or too few system administrators, highly pressured users 4. Users may inadvertently give information on security weaknesses to attackers 5. Incorrect system configuration 6. Security policy not adequate 7. Security policy not enforced 8. Security analysis may have omitted something important or be wrong.			

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THREATS	Impact (0-5)	Probability (0-5)	Total (Impact x Probability)
1. Dishonesty: Fraud, theft, embezzlement, selling of confidential agency information			
2. Attacks by "social engineering" • Attackers may use phone to impersonate employees to persuade users/administrators to give user name/passwords/modem numbers, execute Trojan Horse programs, etc.			
3. Abuse of privileges/trust			
4. Unauthorized use of "open" terminals/PC'			
5. Mixing of test and production data or environments			
6. Introduction of unauthorized software or hardware			
7. Time bombs: Software programmed to damage a system on a certain date			
8. Operating system design errors: Certain systems were not designed to be highly secure			
9. Protocol design errors: Certain protocols were not designed to be highly secure. Protocol weaknesses in TCP/IP can result in: • Source routing, DNS spoofing, TCP sequence guessing, unauthorized access • Hijacked sessions and authentication session/transaction replay, data is changed or copied during transmission • Denial of service, due to ICMP bombing, TCP-SYN flooding, large PING packets, etc.			
10. Logic bomb: Software programmed to damage a system under certain conditions			
11. Viruses in programs, documents, e-mail attachments			

IDENTIFICATION AUTHORIZATION THREATS	Impact (0-5)	Probability (0-5)	Total (Impact x Probability)
1. Attack programs masquerading as normal programs (Trojan horses).			
2. Attack hardware masquerading as normal commercial hardware			
3. External attackers masquerading as valid users or customers			
4. Internal attackers masquerading as valid users or customers			
5. Attackers masquerading as helpdesk/support personnel			

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PRIVACY THREATS	Impact (0-5)	Probability (0-5)	Total (Impact x Probability)

1. Eavesdropping
   • Electromagnetic eavesdropping / Ban Eck radiation
   • Telephone/fax eavesdropping (via "clip-on" telephone bugs, inductive sensors, or hacking the public telephone exchanges
   • Network eavesdropping. Unauthorized monitoring of sensitive data crossing the internal network
   • Subversion of ONS to redirect email or other traffic
   • Subversion of routing protocols to redirect email or other traffic
Radio signal eavesdropping, Rubbish eavesdropping (analyzing waste for confidential documents, etc.)			

INTEGRITY / ACCURACY THREATS	Impact (0-5)	Probability (0-5)	Total (Impact x Probability)
1. Malicious, deliberate damage of information or information processing functions from external sources			
2. Malicious, deliberate damage of information or information processing functions from internal sources			
3. Deliberate modification of information			

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ACCESS CONTROL THREATS	Impact (0-5)	Probability (0-5)	Total (Impact x Probability)
1. Password cracking (access to password files, use of bad – blank, default, rarely changed – passwords)			
2. External access to password files, and sniffing of the networks			
3. Attack programs allowing external access to systems (back doors visible to external networks)			
4. Attack programs allowing internal access to systems (back doors visible to internal networks)			
5. Unsecured maintenance modes, developer backdoors			
6. Modems easily connected, allowing uncontrollable extension of the internal network			
7. Bugs in network soft are which can open unknown/unexpected security holes (holes can be exploited from external networks to gain access. This threat grows as software becomes increasingly complex)			
8. Unauthorized physical access to system			
REPUDIATION THREAT	**Impact (0-5)**	**Probability (0-5)**	**Total (Impact x Probability)**
1. Receivers of confidential information may refuse to acknowledge receipt			
2. Senders of confidential information may refuse to acknowledge source			
LEGAL THREATS	**Impact (0-5)**	**Probability (0-5)**	**Total (Impact x Probability)**
1. Failure to comply with regulatory or legal requirements (ie, to protect confidentiality of employee data)			
2. Liability for acts of internal users or attackers who abuse the system to perpetrate unlawful acts (ie, incitement to racism, gambling, money laundering, distribution of pornographic or violent material)			
3. Liability for damages if an internal user attacks other sites.			

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RELIABILITY OF SERVICE THREATS	Impact (0-5)	Probability (0-5)	Total (Impact x Probability)
1. Major natural disasters, fire, smoke, water, earthquake, storms/hurricanes/tornadoes, power outages, etc			
2. Minor natural disasters, of short duration, or causing little damage			
3. Major human-caused disasters: war, terrorist incidents, bombs, civil disturbance, dangerous chemicals, radiological accidents, etc.			
4. Equipment failure from defective hardware, cabling, or communications system.			
5. Equipment failure from airborne dust, electromagnetic interference, or static electricity			
6. Denial of Service: • Network abuse: Misuse of routing protocols to confuse and mislead systems • Server overloading (processes, swap space, memory, "tmp" directories, overloading services) • Email bombing Downloading or receipt of malicious Applets, Active X controls, macros, PostScript files, etc.			
7. Sabotage: Malicious, deliberate damage of information or information processing functions. • Physical destruction of network interface devices, cables • Physical destruction of computing devices or media • Destruction of electronic devices and media by electromagnetic radiation weapons (HERF Gun, EMP/T Gun) • Deliberate electrical overloads or shutting off electrical power • Viruses and/or worms. Deletion of critical systems files			

Nonprofit and Professional Associations:

American Red Cross: www.redcross.org
Institute for Business & Home Safety: http://www.ibhs.org
National Emergency Management Association: http://www.nemaweb.org
National Fire Protection Association: http://firewise.org
Public Entity Risk Institute: http://www.riskinstitute.org
Small Business Administration: http://www.sba.gov
U.S. Chamber of Commerce: http://www.uschamber.com
Georgia Chamber of Commerce: http://www.gachamber.com/
The Clean Air Campaign (telework resources): http://www.cleanaircampaign.org

Government Resources:

Federal Emergency Management Agency (FEMA): http://www.fema.gov
Georgia Emergency Management & Homeland Security Agency: http://www.gema.state.ga.us/ or
www.ready.ga.gov
U.S. Department of Homeland Security: http://www.ready.gov
U.S. Small Business Administration: http://www.sba.gov

Business Continuity Planning Organizations:

Disaster Recovery Institute International: http://www.drii.org
The Business Continuity Institute: http://www.thebci.org
Business Executives for National Security (BENS): http://www.bens.org/home.html

Business Continuity Planning Publications:

Contingency Planning & Management: http://www.contingencyplanning.com
Continuity Insights: http://www.continuityinsights.com
Disaster Recovery Journal: http://www.drj.com
Disaster Resource Guide: http://www.disaster-resource.com
Disaster Recovery Yellow Pages: http://www.disasterplan.com/yellowpages/

Cyber Security Sites:

Department of Homeland Security National Cyber Alert System:www.us-cert.gov
National Cyber Security Partnership: Small Business Cyber Security Guidebook:
http://www.cyberpartnership.org/CommonSenseGuideBus.pdf
National Cyber Security Alliance: Stay Safe Online: http://www.staysafeonline.info/

Pandemic/Avian Flu Preparedness:

Centers for Disease Control: http://cdc.gov
Georgia Department of Community Health: http://health.state.ga.us/
U.S. Government Pandemic Flu: http://pandemicflu.gov

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Emergency Evacuation Preparedness:

Guide for People with Disabilities and Other Activity Limitations**:** http://www.cdihp.org/
American Red Cross: http://www.redcross.org/prepare/workplace
National Fire Protection Assoc: Conducting Emergency Evacuation Drills: http://www.nfpa.org

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Appendix A: Sample Inclement Weather Leave Policy

- The office will remain open during regular working hours, unless otherwise notified.
- If severe or adverse weather conditions exist, and office management does not make an announcement regarding office closure or changes in duty hours, a liberal leave policy will exist. Employees may request annual leave and under adverse weather or emergency conditions, supervisors should grant annual leave.
- If a change in working hours due to adverse weather or other emergency conditions is made during the day, office management will notify their employees.
- If a time change in openings or closing is made during non-duty hours, the announcement will be made over local radio and television stations as soon as possible in the day. Messages may be heard on the following media outlets: TV – WAGA (Channel 5), WXIA (Channel 11), WSBTV (Channel 2)Radio – WSTR, WGST, WCNN, WOAK/V103.
- The office will implement Unscheduled Telework and Unscheduled Leave Policies for (Day and Date) as appropriate. Email your Supervisor daily of your work status.
- You will receive email, text message and phone message from the Emergency Notification System notifying you of the office closure on (Day and Date). You will receive more than one message. You only have to respond to one message; however, we suggest you respond to one of each kind so that you will know how the system works.

For additional information regarding employment laws relating to natural disasters visit http://www.duanemorris.com/alerts/guidance_for_employers_hurricane_and_disaster_preparation_4193.html.

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The approaches in this guide are recommendations only, not regulations. There are no reporting requirements. Following these principles will not ensure compliance with any Federal, State or local codes or regulations that may apply to your facility or industry.

BE INFORMED   MAKE A PLAN   BUILD A KIT   GET INVOLVED