

Emergency Plan Card

Keep a copy of your emergency plan information in your car, briefcase or purse. Photocopy as needed for additional family members.

If you hear sirens:

- If you hear emergency sirens sound for four minutes in a loud, wavering tone, turn to your Emergency Alert System (EAS) radio or TV station for further instructions.
- EAS broadcasts may instruct you to stay indoors with windows and doors shut, a protective action called “sheltering-in-place.”
- Or, you may be instructed, depending on where you live, to evacuate. Do not evacuate unless your Emergency Response Planning Area (ERPA) is specifically instructed to do so.
- You may be instructed by safety officials on EAS broadcasts to swallow a KI- potassium iodide tablet.

Emergency Alert System (EAS) stations:

AM radio _____ FM radio _____ TV _____

ERPA number _____

General Population Reception Center _____

Recommended route to get to my Reception Center is

Emergency bus stop is located at _____

| | |
|--------------|-------------------------|
| Child’s name | School Reception Center |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

KI-potassium iodide location _____

“Check-in” phone number _____

Meeting place _____

Phone _____

Advance Registration Card for People with Special Needs

If you require assistance in an emergency, please fill out this questionnaire and mail it back to us. Your cooperation will help us in making proper arrangements if it becomes necessary for you to be evacuated during an emergency of any kind. If you have any questions please call 914-231-1851.

Please print

| | |
|---------------------------------------------------------------------------------------------------|---------------|
| Name <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Miss/Ms. | |
| Address, including apartment number, building, floor | |
| City, ZIP+4 | |
| Telephone (Home) | Date of Birth |
| Primary Disability(ies) | |
| Secondary Disability(ies) | |

Name and phone number of a local relative or person who lives near you who should be contacted in an emergency:

| | |
|---------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|
| Name <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Miss/Ms. | |
| Address | |
| City | |
| Telephone | Relationship: <input type="checkbox"/> Family <input type="checkbox"/> Neighbor <input type="checkbox"/> Friend |
| 2nd Telephone | |

ASSISTIVE EQUIPMENT USED:

- Cane(s) Walker Oxygen Other
 Crutches Guide dog Respirator
 Wheelchair Hospital Bed Electric wheelchair

Are you Blind or Partially sighted?

Are you deaf/hearing impaired? Yes No

If yes, do you have TTD/TTY? Yes No

Are you completely bedridden? Yes No

If not, do you have your own transportation? Yes No

If not, can you obtain a ride with a nearby person (relative, neighbor or friend)? Yes No

If not, can you get from your house to a bus stop unassisted? Yes No

Please send additional cards for other persons with special needs in my household.

This information is released for emergency planning use by Westchester County.

Signature _____

Please detach and mail this card. This questionnaire must be completed each time you receive a booklet on emergency planning to assure that we have up-to-date information on your needs.



A MESSAGE FROM COUNTY EXECUTIVE ANDREW SPANO

Dear Westchester Resident:

Like it or not, Indian Point is our neighbor and we need to be prepared in case of emergency. I want to assure you that Westchester County has a comprehensive response plan that would be put into place if there were ever to be an incident at the plant.

The Indian Point Community Emergency Planning guide explains our plan and tells you what you and your family should do. I hope you will read it carefully and complete the section requesting information specific to your family. The detachable card, which can be carried with you, will help you be better prepared with your own family emergency plan.

While this plan was developed by trained professionals, and includes input from hundreds of emergency planners and trained health and public safety professionals, it is still a work-in-progress and is constantly being improved and updated.

I hope this guide will assure you that Westchester County government is doing everything it can to keep you safe in case of an emergency. Please keep it easily available and in a safe place.

Sincerely,

Andrew Spano
Westchester County Executive

WESTCHESTER COUNTY
OFFICE OF EMERGENCY MANAGEMENT
200 Bradhurst Ave-Unit 4
Hawthorne, New York 10532

INSIDE: Important safety information on protecting your family

Community EMERGENCY PLANNING for Indian Point

WESTCHESTER COUNTY 2005-2006

A Guide for You and Your Family

In the event of an emergency at the Indian Point nuclear power plant, this booklet will help you and your family stay safe.

It answers these important questions:

- How will I know if there’s an emergency at Indian Point? See page 1.
- How will I know which protective actions to take? See page 4.
- What Emergency Response Planning Area am I in? See page 3.
- Should I stay indoors? See page 4.
- Should I evacuate? See page 5.
- Where do I go if evacuated? See page 5.
- I have children in school. What happens to them in an emergency? See page 6.
- What is KI-potassium iodide? See page 8.
- What about people with special needs? See page 9.

Read and keep this **IMPORTANT** booklet.



Follow this booklet’s simple six-step process to prepare you and your family for an emergency at Indian Point. Use the large map in the back of this booklet.

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NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES



BUSINESS REPLY MAIL
FIRST-CLASS MAIL PERMIT NO. 244 WHITE PLAINS, NY

POSTAGE WILL BE PAID BY ADDRESSEE

WESTCHESTER COUNTY OF EMERGENCY
SERVICE
4 DANA ROAD
VALHALLA NY 10595-1548



Fold Here