

TOWN OF HINESBURG LOCAL EMERGENCY OPERATIONS PLAN

Emergency Steps

- 1) Establish an Incident Command Structure and make appropriate local decisions
- 2) Delegate Authorities to Incident Commander and request Declaration if appropriate
- 3) Contact State Emergency Operations Center (SEOC) if additional help or resources may be needed beyond mutual aid and local contractors (800-347-0488)
- 4) Alert the general population and evacuate as needed
- 5) Activate your Emergency Operations Center to support the Incident Commander as needed
- 6) Contact the Shelter Coordinator and American Red Cross (800-660-9130) to arrange a shelter opening if needed
- 7) Expand the ICS Structure as needed
- 8) Determine if additional operational shift staffing is needed
- 9) Conduct damage assessment. Report to SEOC
- 10) Conduct and document 'Emergency Repairs'

Future steps

- 11) Refer to your local codes and standards, Vermont Stream Alterations Rule, and local hazard mitigation plan before undertaking permanent repairs
- 12) If damages result in a Federal Declaration, request 406 mitigation when completing a Project Worksheet
- 13) Conduct an after-action review and develop an improvement plan

Jurisdictions' Points of Contact: Identify by priority the top three people to be Points of Contact for your Town during an emergency (ex: EMD, Town Manager, Selectboard Chair, Fire Chief)

| | | | | |
|---|------------------------------|---------------------------------|---------------------------|--------------------------------|
| Job Title: Fire Fire chief & EM | First Name: Al | Last Name : Barber | Work 777 2240 | Radio call sign 1C1 |
| Email Address VT13202aol.com | Cell # 777 2240 | Pager # | Home # 482 2687 | Time Contacted |
| Job Title: Police Chief | First Name Frank | Last Name Koss | Work # 482 3397 | Radio call sign M-21 |
| Email Address fkoss@dps.state.vt.us | Cell # 318 1440 | Pager # n/a | Home # | Time Contacted |
| Job Title Select board Chair | First Name Michael | Last Name Bissonnette | Work # | Radio call sign |
| Email Address | Cell # | Pager # | Home # | Time Contacted |
| | | | | |

County: **Chittenden**

Name of town EMD **Al Barber**

Date LEOP adopted:

Date NIMS adopted: _____

I, the select board chair or town manager, certify that this Local Emergency Operations Plan has been adopted (certifying individual must have taken, at minimum, ICS 402 or ICS 100 training): _____

Physical Municipal Address: **10632 RT 116 Hinesburg vt**

Telephone: **482 2281**

Fax: **482 5404**

E-mail: **hinesburgtown@gmavt.net**

Alternate communication method: _____

This Local Emergency Operations Plan must be adopted annually, after town meeting day, and submitted by May 1st.

Response and Recovery Guidelines

Please use this as an aid for baseline actions that should occur in an incident.

| 1) Establish an Incident Command Structure and make appropriate local decisions | | | <input checked="" type="checkbox"/> | Time |
|---|--|--|-------------------------------------|------|
| a. Identify the Incident Commander | | | <input type="checkbox"/> | |
| b. Identify the Incident Command Post | | | <input type="checkbox"/> | |
| c. Start a log of actions taken (see Appendix A3- Activity Log (ICS Form 214)) | | | <input type="checkbox"/> | |
| d. Assess the situation (deploy assessment teams) | | | <input type="checkbox"/> | |
| | Determine casualties | | <input type="checkbox"/> | |
| | Determine structure/infrastructure losses | | <input type="checkbox"/> | |
| | Determine resource needs | | <input type="checkbox"/> | |
| | Identify emergency access sites or isolated citizens | | <input type="checkbox"/> | |
| e. Request additional resources (Mutual Aid) if needed. | | | <input type="checkbox"/> | |
| f. Secure a perimeter around affected area if needed | | | <input type="checkbox"/> | |
| g. Consider potential staffing needs (extended or multiple operational periods) | | | <input type="checkbox"/> | |

| 2) Delegate Authorities to Incident Commander and request Declaration if appropriate | | | <input checked="" type="checkbox"/> | Time |
|--|--|--|-------------------------------------|------|
| Have highest ranking town official delegate authority to and meet with Incident Commander as appropriate (see Appendix D4 – Delegation of Authority) | | | <input type="checkbox"/> | |
| If needed, the highest ranking town official should sign the Local Jurisdiction Request for Emergency Declaration, and send to DEMHS. (see Appendix A1 – Local Jurisdiction Request for Emergency Declaration) | | | <input type="checkbox"/> | |

| 3) Contact State Emergency Operations Center if additional help or resources may be needed beyond mutual aid and local contractors | | | <input checked="" type="checkbox"/> | Time |
|--|-----------------------|--|-------------------------------------|------|
| Call State Emergency Operations Center and notify that additional resources may be needed. | 1-800-347-0488 | | <input type="checkbox"/> | |
| If HAZMAT involved, contact HAZMAT Hotline | 1-800-641-5005 | | <input type="checkbox"/> | |

| 4) Alert the general population and evacuate as needed | | | <input checked="" type="checkbox"/> | Time |
|--|--|--|-------------------------------------|------|
| Alert the Public (including special needs or vulnerable populations) of the hazards of the event at the outset and during the event (including protective actions and evacuation information). Suggested methods (siren, PA, door-to-door, town website, facebook, twitter, front porch forum) | | | <input type="checkbox"/> | |
| Complete Planning Task #1 (see page 4) | | | <input type="checkbox"/> | |

| 5) Activate the Emergency Operations Center to support the Incident Commander as needed (See Planning Task #3 on page 5) | | | <input checked="" type="checkbox"/> | Time |
|--|----------------|---------------------|-------------------------------------|------|
| Facility Name | Address | Phone Number | | |
| Hinesburg Fire Department | 10430 Rt 116 | 802 482 2455 | <input type="checkbox"/> | |
| Maintain communications with the SEOC (DisasterLAN, Phone, Fax, Email) | | | <input checked="" type="checkbox"/> | |

| 6) Contact the Shelter Coordinator and American Red Cross (800-660-9130) to arrange a shelter opening if needed (See Planning Task #6 on page 6) | | | | <input checked="" type="checkbox"/> | Time |
|--|---|---|-----------------------|-------------------------------------|---------|
| Notify the American Red Cross that shelters are needed | | | | <input type="checkbox"/> | |
| Contact Shelter Manager | | | | <input type="checkbox"/> | |
| Shelter Name | Physical Address/Location of the Shelter | Shelter Phone # and Manager Name | # of occupants | | |
| | | | | <input type="checkbox"/> | Opened: |
| | | | | <input type="checkbox"/> | Closed: |
| | | | | <input type="checkbox"/> | Opened: |
| | | | | <input type="checkbox"/> | Closed: |
| | | | | <input type="checkbox"/> | Opened: |
| | | | | <input type="checkbox"/> | Closed: |

7) Expand the ICS Structure as needed (see Appendix A3 – Incident Briefing (ICS Form 201))

| | | | |
|---|--|-------------------------------------|------|
| 8) Determine if additional operational shift staffing is needed | | <input checked="" type="checkbox"/> | Time |
| Determine the operational period (8hrs, 12hrs, etc) | | <input type="checkbox"/> | |
| Identify staffing for future operational periods (see Appendix A3–Organizational Assignment List (ICS Form 203)) | | <input type="checkbox"/> | |
| Develop plans for the next operational period (see Appendix A3– Incident Action Plan (ICS Forms 202, 203, 204, 205, 206)) | | <input type="checkbox"/> | |
| | What is the Operational Period? hrs to hrs | <input type="checkbox"/> | |
| | What is the briefing time? hrs | <input type="checkbox"/> | |
| As the incident winds down, release excess resources as per demobilization plans | | <input type="checkbox"/> | |

| | | | |
|--|--|-------------------------------------|------|
| 9) Conduct damage assessment. Report to the State Emergency Operations Center | | <input checked="" type="checkbox"/> | Time |
| Complete Planning Task #2 (see page 4) | | <input type="checkbox"/> | |
| Conduct a complete damage assessment for public and private damages. Submit Local Situation Report to the State Emergency Operations Center (see Appendix A2 – Local Situation Report) | | <input type="checkbox"/> | |

| | | | |
|--|--|-------------------------------------|------|
| 10) Conduct and document 'Emergency Repairs' | | <input checked="" type="checkbox"/> | Time |
| Make roads passable and restore emergency access. Undertake Emergency Protective Measures (eg. removing debris threatening inhabited structures, culverts, and bridges). Emergency Protective Measures (temporary and permanent) must be consistent with the provisions of the Vermont Stream Alterations Rule (see Appendix C2) | | <input type="checkbox"/> | |

| | | |
|---|-----------------------|---|
| 11) Refer to your local codes and standards, including the most current Town Road and Bridge Standards as provided by the Agency of Transportation, Vermont Stream Alterations Rule (See Appendix C2), and local hazard mitigation plan before undertaking permanent repairs | | |
| Document (photographs, maps, invoices, material quantities) all repairs for future mitigation actions. (ex: roadside/ditch erosion, repair with larger culvert, replace with better materials, etc) | | |
| Area Damaged | Cost of repair | Mitigation Solution (see local Hazard Mitigation Plan) |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

12) If damages result in a Federal Declaration, request 406 mitigation when completing a Project Worksheet.

13) Conduct an after-action review and develop an improvement plan.

PLANNING TASKS

Please complete the white portion of these planning tasks prior to an incident occurring. During the incident, please complete the shaded portions.

| Planning Task #1 | | | | |
|--|--|--|------------------|-------------------------------------|
| High Risk Populations List (for special attention/possible evacuation during an incident) | | Complete this information before an incident | | |
| High Risk Population Type (school, daycare, nursing home, medical equipment-dependent resident, handicapped resident) | High Risk Population Location (physical location) | Point of Contact | POC Phone Number | Evacuated To (physical location) |
| Hinesburg Community School | 10888 Rt 116 | | 482-2106 | |
| Hinesburg Nursery School | 10856 RT 116 | | 482-3827 | |
| Renee Durochia | 314 Ledgewood Lane | Renee Durochia | | |
| Champlain Valley Union H.S | 369 CVU Road | Adam Bunting | 482-7100 | |
| Annettes play school | 96 Pond rd | | 482-2525 | |
| Karens Day Care | 77 Plette | Karen Stearns | 482-2557 | |
| Linda Leclair's day care | 2093 silver St | Linda Leclair | 482-3028 | |
| Mary Lewis | 8832 RT 116 | Mary Lewis | 482-2270 | |
| Kellys field | Kellys field rd | | | |
| Mountain View Mobile Home Park | Buck Hill East | | | |
| Sunset Villa Mobile Home Park | Jordan Street | Clyde Bovat | 488-4849 | |
| Hillview Mobile Home Park | Richmond Road | | | |

| Planning Task #2 | | |
|--|--------------------------------------|--|
| Major High Hazard and/or Vulnerable Sites List (locations to check for damage) | | |
| Complete this information before an incident | | Complete this information during an incident |
| Site Type: (ex: dam, culvert, bridges, railway crossing, low-lying area) | Site Location (physical location) | Checked by |
| Sunset Lake Dam, | Behind Iroquis Manufacturing | |
| Canal Dam | Rt 116 @ Mechanicsville rd | |
| Nestec Dam | Behind Nestec 223 Commerce ST | |

| | | | | |
|---------------------------------|----------|--|--|--|
| Lake Iroquios Dam | Wood Run | | | |
| Lewis creek rd | | | | |
| Shelburne falls rd | | | | |
| Swamp Rd | | | | |
| 2312-2314 Hinesburg Hollow Road | | | | |

* If additional space is needed, please attach information on a separate sheet.

**Planning Task #3
Pre-designated Local Emergency Operations Centers**

| Facility Name | Facility Address (physical location) | Facility Point of Contact | Facility Phone Number |
|---|---|--------------------------------------|----------------------------------|
| Primary: Hinesburg Fire Department | 10430 Rt 116 Hinesburg | Chief Al Barber | 482 2455 |
| Secondary: Hinesburg Town Hall | 10632 Rt 116 Hinesburg | Chief Al Barber | 482 2281 |
| Tertiary: | | | |

**Planning Task #4
Functional Area/ Local Support Function**

Please identify agencies responsible for maintaining resource lists, found in Appendix B5.

| Local Support Function | Agency Responsible for maintaining resource list: (see Appendix B5- Resource Lists) |
|---|--|
| 1. Transportation - Assets in support of the movement of emergency resources, including the evacuation of people and distribution of food and supplies. | Hinesburg Fire Department |
| 2. Communications - Includes emergency warning, information and guidance to the public and responders. Includes resources and back-up resources for all means of communication. | Hinesburg Fire Department |
| 3. Public Works & Engineering - Resources in support of debris clearance, road, highway, bridge repairs and restoration of essential public works systems and services and the safety inspection of damaged public buildings. | Hinesburg Highway Hinesburg Water Dept |
| 4. Firefighting - Resources in support of structural and wildfire firefighting. | Hinesburg Fire Department |
| 5. Emergency Management, Recovery & Mitigation - Resources in support of the local Incident Commander through a Local Emergency Operations Center. Includes personnel resources available to provide overall coordination of the town's emergency operations. Resources may serve as a remote ICS planning section to collect, analyze and disseminate critical information on emergency operations for decision making purposes. May provide liaison with state/federal government. | Hinesburg Emergency Manager Select board |
| 6. Mass Care, Food & Water - Resources available to coordinate sheltering, feeding and first aid for disaster victims. | Hinesburg Fire Department |
| 7. Resource Support - Assets available for coordination and documentation of personnel, equipment, supplies, facilities and services used during disaster response and initial relief operations. | VT emergency Management |
| 8. Health & Medical Services - Resources for care and treatment for the ill and injured. Includes lists of trained health and medical personnel and other emergency medical supplies, materials and facilities. Assets include public health and environmental sanitation services, disease and vector control guidelines and resources for the collection, identification, and protection of human remains. | Hinesburg Fire Department VT Emergency Management |
| 9. Search & Rescue - Resources locally available to locate, identify and remove persons from a stricken area, including those lost or trapped in buildings and other structures. Also includes resources to coordinate S&R for those lost in non-inhabited areas. | VT State Police |
| 10. Hazardous Materials - Resources available for response, inspection, containment and cleanup of hazardous materials. | VT Hazmat Team |
| 11. Agriculture & Natural Resources - Assets available for use in coordinated response in the management and containment of communicable diseases in an animal health or plant emergency | VT Agency of natural resources |
| 12. Energy - Assets available for the emergency repair and restoration of critical public energy utilities. Includes locally available back-up power resources. Coordinates the rationing and distribution of emergency power and fuel. | Green Mt Power VT Eletric Co op |
| 13. Law Enforcement - Assets used for the protection of life and property by enforcing laws, orders and regulations. Resources available for area security, traffic and access control. | Hinesburg Police VT State Police |
| 14. Public Information - Pre-identified personnel and resources used for effective collection, control and dissemination of public information to inform the general public of emergency conditions and available assistance. | Hinesburg Fire Department Selectboard |

**Planning Task #5
Disaster Lead Agency/Coordinator**

Who or what agency will likely be the lead for each type of disaster?

| Agency | Drought | Flood | Fire | Winter Storm | Ice Storm | Power Outage | Infectious Disease | Animal/Plant Emergency | Mass Casualty Incident | Hazardous Materials Spill | Public Gathering | Civil Unrest | Other (Please Specify) | Other (Please Specify) | Other (Please Specify) |
|-----------------------------------|---------|-------|------|--------------|-----------|--------------|--------------------|------------------------|------------------------|---------------------------|------------------|--------------|------------------------|------------------------|------------------------|
| Road Crew / Public Works | | X | | X | X | | | | | | | | | | |
| Fire Department | x | X | x | x | x | X | x | X | x | x | | | | | |
| Town Selectboard | X | | | | | | | | | | x | | | | |
| Law Enforcement | | x | | x | x | X | | x | | | X | X | | | |
| 1 st Response / Rescue | x | x | x | x | x | x | x | | x | x | X | | | | |
| Shelter Coordinator | | | | | | | | | | | X | | | | |
| Animal Control Officer | | | | | | | | X | | | | | | | |
| Town Health Officer | | | | | | | X | | | | | | | | |
| Town Clerk | | | | | | | | | | | | | | | |
| Town Treasurer | | | | | | | | | | | | | | | |
| Other (Please Specify) | | | | | | | | | | | | | | | |
| Other (Please Specify) | | | | | | | | | | | | | | | |
| Other (Please Specify) | | | | | | | | | | | | | | | |

Planning Task # 6

Shelters

Shelter 1

| | | |
|---|--|---|
| Shelter Name: Champlain Valley Union H.S | Physical Address/Location of the Shelter: 369 CVU RD | Shelter Capacity: 2000 |
| Shelter Manager: | Shelter Manager Cell #: Shelter Manager Pager #: | Other Contact: |
| <input checked="" type="checkbox"/> Warming Shelter | <input checked="" type="checkbox"/> Overnight Shelter | <input checked="" type="checkbox"/> Red Cross Agreement? |
| <input checked="" type="checkbox"/> Has a Backup Generator | <input type="checkbox"/> Has wiring in-place for generator hookup | |

Shelter 2

| | | |
|--|--|---|
| Shelter Name: Hinesburg Community School | Physical Address/Location of the Shelter: 10888 Rt 116 | Shelter Capacity: 1000 |
| Shelter Manager: | Shelter Manager Cell #: Shelter Manager Pager #: | Other Contact: |
| <input checked="" type="checkbox"/> Warming Shelter | <input checked="" type="checkbox"/> Overnight Shelter | <input checked="" type="checkbox"/> Red Cross Agreement? |
| <input type="checkbox"/> Has a Backup Generator | <input type="checkbox"/> Has wiring in-place for generator hookup | |

Shelter 3

| | | |
|--|---|---|
| Shelter Name: Hinesburg town hall | Physical Address/Location of the Shelter: 10632 Rt 116 | Shelter Capacity: 100 |
| Shelter Manager: | Shelter Manager Cell #: Shelter Manager Pager #: | Other Contact: |
| <input checked="" type="checkbox"/> Warming Shelter | <input checked="" type="checkbox"/> Overnight Shelter | <input checked="" type="checkbox"/> Red Cross Agreement? |
| <input type="checkbox"/> Has a Backup Generator | <input checked="" type="checkbox"/> Has wiring in-place for generator hookup | |

American Red Cross – Vermont & the New Hampshire Upper Valley Region: 1-800-660-9130
 Burlington Office – (802)660-9130 Rutland Office – (802) 773-9159 Brattleboro Office – (802) 254-2377

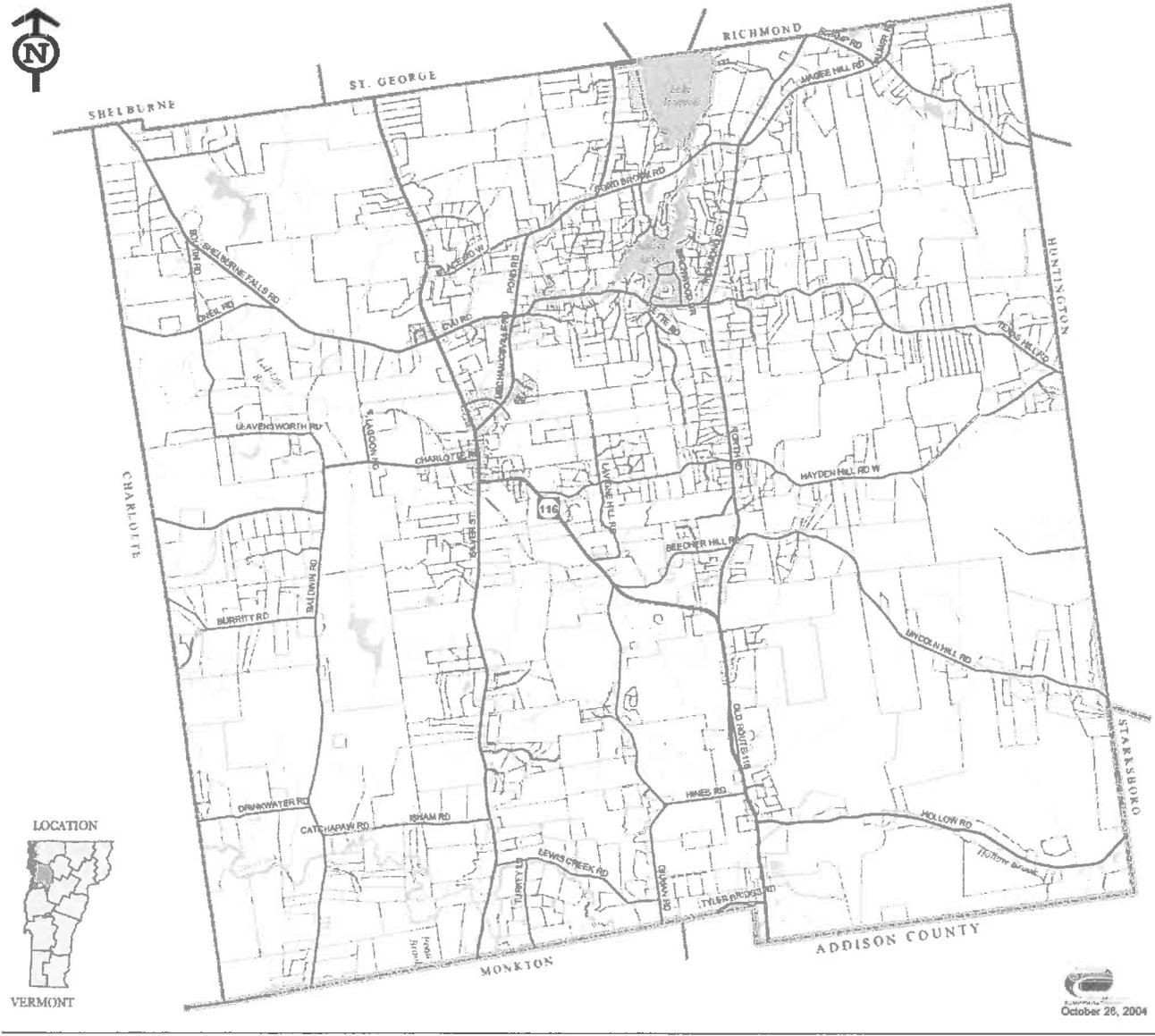
Planning Task #7 - NIMS Typed Resources

| Type | I | II | III | IV | Other | Type | I | II | III | IV | Other |
|---|---|----|-----|----|-------|---|---|----|-----|----|-------|
| Critical Incident Stress Management Team | | | | | | Hydraulic Excavator, Large Mass Excavation | | | | | |
| Mobile Communications Center | | | | | | Hydraulic Excavator, Medium Mass Excavation | | | | | |
| Mobile Communications Unit | | | | | | Hydraulic Excavator, Compact | | 1 | | | |
| All-Terrain Vehicles | | | | | | Road Sweeper | | | | | |
| Marine Vessels | | | | | | Snow Blower, Loader Mounted | | | | | |
| Snowmobile | | | | | | Track Dozer | | | | | |
| Public Safety Dive Team | | | | | | Track Loader | | | | | |
| SWAT/Tactical Team | | | | | | Trailer, Equipment Tag-Trailer | | 1 | | | |
| Firefighting Brush Patrol Engine | | | | | | Trailer, Dump | | | | | |
| Fire Engine (Pumper) | | | 2 | | | Trailer, Small Equipment | | 1 | | | |
| Firefighting Crew Transport | | | | | | Truck, On-Road Dump | | 2 | 2 | | |
| Aerial Fire Truck | | | | | | Truck, Plow | 2 | 2 | 2 | | |
| Foam Tender | | | | | | Truck, Sewer Flusher | | | | | |
| Hand Crew | | | | | | Truck, Tractor Trailer | | | | | |
| HAZMAT Entry Team | | | | | | Water Pumps, De-Watering | | | 1 | | 1 |
| Engine Strike Team | | | | | | Water Pumps, Drinking Water Supply - Auxiliary Pump | | | | | |
| Water Tender (Tanker) | | | | | | Water Pumps, Water Distribution | | | | | |
| Fire Boat | | | | | | Water Pumps, Wastewater | | | | | |
| Aerial Lift - Articulating Boom | | | | | | Water Truck | | | | | 2 |
| Aerial Lift - Self Propelled, Scissor, Rough Terrain | | | | | | Wheel Dozer | | | | | |
| Aerial Lift - Telescopic Boom | | | | | | Wheel Loader Backhoe | | | | | |
| Aerial Lift - Truck Mounted | | | | | | Wheel Loader, Large | | | | | |
| Air Compressor | | | | 1 | | Wheel Loader, Medium | | | | | |
| Concrete Cutter/Multi-Processor for Hydraulic Excavator | | | | | | Wheel Loader, Small | | | 1 | | |
| Electronic Boards, Arrow | | | | | | Wheel Loader, Skid Steer | | | | | |
| Electronic Boards, Variable Message Signs | | | | | | Wheel Loader, Telescopic Handler | | | | | |
| Floodlights | | | | | | Wood Chipper | 1 | | | | |
| Generator | | | | | 3 | Wood Tub Grinder | | | | | |
| Grader | | 1 | | | | | | | | | |

Information about the NIMS Typed resources can be found at: <https://rtlt.ptaccenter.org/Public/Combined>

Town Maps

Please insert town maps here. These maps can include things such as roads, town boundaries, shelter locations, high hazard/vulnerable sites, etc.



| | |
|--|----------|
| Appendix A – Disaster Forms | A |
| Local Request for Emergency Declaration..... | A1 |
| Local Situation Report..... | A2 |
| ICS Forms..... | A3 |
| | |
| Appendix B – Local Documents | B |
| List of Delegations of Authority | B1 |
| Communication Plan..... | B2 |
| Emergency Contact List..... | B3 |
| List of Mutual Aid Agreements | B4 |
| Resource Lists | B5 |
| Maps, Diagrams, Plans, and Attachments | B6 |
| CPOD Profile..... | B6.1 |
| | |
| Appendix C – References & Authorities | C |
| Emergency Relief and Assistance Fund | C1 |
| Vermont Stream Alteration Rule..... | C2 |
| Minimum Grant Standards | C3 |
| Vermont Statute Title 20, Chapter 1 | C4 |
| NIMS Executive Order | C5 |
| | |
| Appendix D – Templates | D |
| NIMS Adoption..... | D1 |
| Mutual Aid | D2 |
| Emergency Management Ordinance..... | D3 |
| Delegation of Authority..... | D4 |

LOCAL JURISDICTION REQUEST FOR EMERGENCY DECLARATION

The Town of **Hinesburg**

Has suffered property damage and/or injury or loss of life resulting from a disaster that exceeds our capability to respond to and recover from and that requires the assistance of the State to protect the health, well-being and public safety of our citizens. Therefore, as provided in 20 VSA Section 10, in my capacity as a:

- Director of Emergency Management
- Member of Legislative Body
- City/Town Manager
- Mayor

I request that the Governor declare a state of emergency for the jurisdiction of: _____

This disaster began on _____ (mm/dd/yyyy). We have activated and utilized our Local Emergency Operations Plan. I request that the State of Vermont activate and utilize its Emergency Operations Plan and authorize any resources needed to respond to, mitigate and recover from this disaster.

I have provided Local Situation Report information to a Regional Planning Commission Local Liaison;

OR,

The initial Local Situation Report is attached to this request.

Dated at _____, Vermont this _____ day of _____ 20 _____.

Signature and title _____

Printed or typed name and title _____

Contact information for confirmation (email/ph/fax/radio): _____

**Telephone the State Emergency Operations Center at (800) 347-0488 or (802) 244-8721
and
email this request as promptly as possible to SEOC at dps.dlanplanning@vermont.gov
or fax 1-802-241-5556**

Reference: 20 VSA §10. - The all-hazards event provisions of this chapter shall not be brought into action, unless the municipal director of emergency management, a member of the legislative body of the municipality, the city or town manager, or the mayor of a city that is within the area affected by an all-hazards event shall declare an emergency and request the governor to find that a state of emergency exists and the governor so finds, or unless the governor declares a state of emergency under section 9 of this title. (Amended 2005, No. 209 (Adj. Sess.), § 11.)

Vermont Local Situation Report

IF YOU REQUIRE IMMEDIATE ASSISTANCE, PLEASE CALL 1-800-347-0488

The State Emergency Operations Center will contact the individuals listed in the Local Emergency Operations Plan to request the information on this form. If your community has not been contacted by the State Emergency Operations Center, please submit this completed form to:

dps.dlanplanning@vermont.gov

City/Town of Hinesburg

Report # _____

Date: _____

Time: _____

No assistance requested

Point of Contact

Who has been appointed as the Incident Commander (name and title)? _____

Reporting Point of Contact (name and title): _____ POC Contact number: _____

Local Emergency Operations Center

A local EOC has been activated

A local EOC has NOT been activated

Location of Local EOC: _____

Local EOC Director: _____

Local EOC contact number: _____

Critical Elements of Information

What is the nature of your Disaster? _____

Are there any injuries in your community? No Yes. How Many? _____

Are there any deaths in your community? No Yes. How Many? _____

Evacuation Status: No evacuations at this time Yes If yes, # evacuated _____

Are any individuals isolated? No Yes. If yes, # Buildings _____ #Individuals _____

Have you opened a shelter? If so, what are the locations? No Yes _____

Areas of town without power: _____

Are there any school closures: _____

What is the status of your roads and bridges?

All passable The following roads and/or bridges are closed: _____

Any Questions, please call the State EOC at (800) 347-0488

Vermont Local Situation Report

IF YOU REQUIRE IMMEDIATE ASSISTANCE, PLEASE CALL 1-800-347-0488

Property Damages

| | # Affected | # Minor | # Major | # Destroyed |
|---|------------|---------|---------|-------------|
| Residential damages: Single Family | | | | |
| Residential damages: Mobile Homes | | | | |
| Residential damages: Apartments | | | | |
| Total residential damages for incident | | | | |
| Business damage | | | | |
| Farm damage | | | | |
| Total business and farm damages for | | | | |

Please attach a list of names, addresses, and contact information for these properties.

Damage Guidelines:

Affected: No access, loss of power

Minor: Small amount of roofing or siding lost or windows broken, basement flooding in non-living space.

Major: Large amount of roofing or siding lost; some structural damage; basement flooding of living space. Structure habitable with short-term repairs.

Destroyed: Major structural damage, building not habitable without long-term repairs. Foundation damage.

Infrastructure Estimated Costs

(Please do not delay initial submission of situation report to determine costs)

Estimate the costs for the following:

Road and bridge damage: \$_____

Public utility (overtime, debris clearing, replacement): \$_____

Cost of debris clearing on public infrastructure (overtime, no private roads or drives): \$_____

Other public property damage: \$_____

Other costs (please describe): \$_____

Do you need assistance? No Yes. If yes, call 1-800-347-0488 and request assistance.

Are you requesting an emergency declaration? No Yes. If yes, attach completed Local Jurisdiction Request for Emergency Declaration.

Please use this space to report any additional information: _____

| NEXT ANTICIPATED REPORT | |
|-------------------------|-------|
| Date: | Time: |

Any Questions, please call the State EOC at (800) 347-0488

List of Delegations of Authority

“Delegations of authority identify who is authorized to act on behalf of senior leadership or other officials for specified purposes and ensures that designated individuals have the legal authorities to carry out their duties. To the extent possible, these authorities should be identified by title or position, and not by the individual office holder’s name. Generally, predetermined delegations of authority will take effect when normal channels of direction are disrupted and will terminate when these channels are reestablished.”¹

Below, please indicate the signed delegations of authority within your jurisdiction. Please attach those delegations to this document for ease of reference. A Delegation of Authority template has been included in the Templates appendix of this plan.

| Name & Title | Date Executed | Authority |
|-------------------------|----------------------|------------------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

¹ (Federal Emergency Management Agency, 2009, pp. f-1)

Communication Plan

Municipal communication plans should be in compliance with NIMS guidelines and aligned with the National Emergency Communications Plan (NECP) and the Vermont Statewide Communications Interoperability Plan (SCIP). National Interoperability Channels should only be used during significant multi-agency events where there is a critical need. The Vermont Communications Board (VCOMM) will be issuing SOPs for use of these channels.

Please use the attached ICS 217 form to inventory frequencies and who they are assigned to. Performing this inventory ahead of an incident will assist you in completing an ICS 205 when an incident occurs. Planning and preparedness are keys to the successful response and remediation efforts and challenges.

For questions about this plan, please call 1-800-347-0488 or visit VCOMM's website:
<http://vermontcommunications.vermont.gov/>

EMERGENCY CONTACT LIST

| Emergency Management Contact List | | | | | |
|--|----------------|--|---------------------|---------------------|-------------------------|
| PLEASE DO NOT USE THE SAME TELEPHONE NUMBERS IN MULTIPLE BOXES. | | | | | |
| | Time Contacted | Job Title | First Name | Last Name | Work # |
| <input type="checkbox"/> | | Fire Chief | Al | Barber | |
| | Date | Email Address | Cell # | Pager # | Home # |
| | | <u>VT1320@aol.com</u> | 802-777-2240 | | 802-482-2687 |
| | Time Contacted | Job Title | First Name | Last Name | Work # |
| <input type="checkbox"/> | | Emergency Manager | Al | Barber | |
| | Date | Email Address | Cell # | Pager # | Home # |
| | | <u>VT1320@aol.com</u> | 802-482-2687 | | 802-482-2687 |
| | Time Contacted | Job Title | First Name | Last Name | Work # |
| <input type="checkbox"/> | | Police Chief | Frank | Koss | 802-482-3397 |
| | Date | Email Address | Cell # | Pager # | Home # |
| | | <u>frank.koss@vermont.gov</u> | 802-318-1440 | | |
| | Time Contacted | Job Title | First Name | Last Name | Work # |
| <input type="checkbox"/> | | Highway Foreman | Mike | Anthony | 802-482-2635 |
| | Date | Email Address | Cell # | Pager # | Home # |
| | | <u>hinesburghighway@gmavt.net</u> | 802-734-7519 | | |
| | Time Contacted | Job Title | First Name | Last Name | Work # |
| <input type="checkbox"/> | | Water/Waste Water Superintendent | Eric | Bailey | 482- |
| | Date | Email Address | Cell # | Pager # | Home # |
| | | <u>ebailey@hinesburg.org</u> | 802-316-1521 | 802-482-8229 | |
| | Time Contacted | Job Title | First Name | Last Name | Work # |
| <input type="checkbox"/> | | Town Administrator | Trevor | Lashua | 802-482-2281x221 |
| | Date | Email Address | Cell # | Pager # | Home # |
| | | <u>tlashua@hinesburg.org</u> | 802-598-8514 | | |
| | Time Contacted | Job Title | First Name | Last Name | Work # |
| <input type="checkbox"/> | | Special Projects Coordinator | Reneae | Marshall | 802-482-2281x222 |
| | Date | Email Address | Cell # | Pager # | Home # |
| | | <u>rmarshall@hinesburg.org</u> | 802-578-2227 | | |
| | Time Contacted | Job Title | First Name | Last Name | Work # |
| <input type="checkbox"/> | | Town Clerk | Missy | Ross | 482-2281x223 |
| | Date | Email Address | Cell # | Pager # | Home # |
| | | <u>mross@hinesburg.org</u> | | | |
| | Time Contacted | Job Title | First Name | Last Name | Work # |
| <input type="checkbox"/> | | Asst Town Clerk | Cheryl | Hubbard | 802-482-2281x224 |
| | Date | Email Address | Cell # | Pager # | Home # |
| | | <u>chubbard@hinesburg.org</u> | | | |
| | Time Contacted | Job Title | First Name | Last Name | Work # |
| <input type="checkbox"/> | | Health Officer | Joe | Gannon | 802-482-2281x223 |
| | Date | Email Address | Cell # | Pager # | Home # |

| | | | | | |
|--------------------------|----------------|--|--------------|------------|------------------|
| | | igannon@hinesburg.org | 802-777-8690 | | |
| | Time Contacted | Job Title | First Name | Last Name | Work # |
| <input type="checkbox"/> | | Planning/Zoning Admin | Alex | Weinhagen | 802-482-2281x225 |
| | Date | Email Address | Cell # | Pager # | Home # |
| | | aweinhagen@hinesburg.org | | | |
| | Time Contacted | Job Title | First Name | Last Name | Work # |
| <input type="checkbox"/> | | Selectboard Chair | Michael | Bissonette | |
| | Date | Email Address | Cell # | Pager # | Home # |
| | | mbissonette@hinesburg.org | 802-598-8549 | | 802-482-2236 |
| | Time Contacted | Job Title | First Name | Last Name | Work # |
| <input type="checkbox"/> | | Selectboard member | Tom | Ayer | 802-482-3186 |
| | Date | Email Address | Cell # | Pager # | Home # |
| | | tayer@hinesburg.org | 802-735-7404 | | 802-482-5163 |
| | Time Contacted | Job Title | First Name | Last Name | Work # |
| <input type="checkbox"/> | | Selectboard member | Andrea | Morgante | |
| | Date | Email Address | Cell # | Pager # | Home # |
| | | amorgante@hinesburg.org | | | 802-482-5120 |
| | Time Contacted | Job Title | First Name | Last Name | Work # |
| <input type="checkbox"/> | | Selectboard member | Aaron | Kimball | |
| | Date | Email Address | Cell # | Pager # | Home # |
| | | akimball@hinesburg.org | | | 802-482-7458 |
| | Time Contacted | Job Title | First Name | Last Name | Work # |
| <input type="checkbox"/> | | Selectboard member | Phil | Pouech | 802-482-2255 |
| | Date | Email Address | Cell # | Pager # | Home # |
| | | ppouech@hinesburg.org | | | 802-482-2060 |
| | Time Contacted | Job Title | First Name | Last Name | Work # |
| <input type="checkbox"/> | | CVU Facility Supervisor | Kurt | Prouix | 802-482-7177 |
| | Date | Email Address | Cell # | Pager # | Home # |
| | | kproulx@cvuhs.org | 802-430-9021 | | |
| | Time Contacted | Job Title | First Name | Last Name | Work # |
| <input type="checkbox"/> | | HCS Facility Supervisor | Tim | Peet | 802-482-6297 |
| | Date | Email Address | Cell # | Pager # | Home # |
| | | tpeet@cssu.org | 802-363-5818 | | |
| | Time Contacted | Job Title | First Name | Last Name | Work # |
| <input type="checkbox"/> | | | | | |
| | Date | Email Address | Cell # | Pager # | Home # |
| | | | | | |
| | Time Contacted | Job Title | First Name | Last Name | Work # |
| <input type="checkbox"/> | | | | | |
| | Date | Email Address | Cell # | Pager # | Home # |
| | | | | | |
| | Time Contacted | Job Title | First Name | Last Name | Work # |
| <input type="checkbox"/> | | | | | |
| | Date | Email Address | Cell # | Pager # | Home # |
| | | | | | |
| | Time Contacted | Job Title | First Name | Last Name | Work # |

| | | | | | |
|--------------------------|----------------|---------------|------------|-----------|--------|
| <input type="checkbox"/> | | | | | |
| | Date | Email Address | Cell # | Pager # | Home # |
| | | | | | |
| | Time Contacted | Job Title | First Name | Last Name | Work # |
| <input type="checkbox"/> | | | | | |
| | Date | Email Address | Cell # | Pager # | Home # |
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| | Time Contacted | Job Title | First Name | Last Name | Work # |
| <input type="checkbox"/> | | | | | |
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| | Time Contacted | Job Title | First Name | Last Name | Work # |
| <input type="checkbox"/> | | | | | |
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| | Time Contacted | Job Title | First Name | Last Name | Work # |
| <input type="checkbox"/> | | | | | |
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| | Time Contacted | Job Title | First Name | Last Name | Work # |
| <input type="checkbox"/> | | | | | |
| | Date | Email Address | Cell # | Pager # | Home # |
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| | Time Contacted | Job Title | First Name | Last Name | Work # |
| <input type="checkbox"/> | | | | | |
| | Date | Email Address | Cell # | Pager # | Home # |
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| | Time Contacted | Job Title | First Name | Last Name | Work # |
| <input type="checkbox"/> | | | | | |
| | Date | Email Address | Cell # | Pager # | Home # |
| | | | | | |
| | Time Contacted | Job Title | First Name | Last Name | Work # |
| <input type="checkbox"/> | | | | | |
| | Date | Email Address | Cell # | Pager # | Home # |
| | | | | | |
| | Time Contacted | Job Title | First Name | Last Name | Work # |
| <input type="checkbox"/> | | | | | |
| | Date | Email Address | Cell # | Pager # | Home # |
| | | | | | |

Mutual Aid List

| Mutual-Aid List: Contact phone numbers of specialty resources for use in disaster | | | | |
|--|------|---|------------------------|--------------------------------|
| APPENDIX | | | | |
| | | Resource | 24 hour Phone # | Primary Radio Frequency |
| <input type="checkbox"/> | Time | <input type="checkbox"/> American Red Cross: | | |
| <input type="checkbox"/> | Time | <input type="checkbox"/> Fire, Town of: Richmond | 802-434-2002 | 154.310 pl: |
| <input type="checkbox"/> | Time | <input type="checkbox"/> Fire, Town of: Charlotte | 802-425-3111 | 154.325 pl: |
| <input type="checkbox"/> | Time | <input type="checkbox"/> Fire, Town of: Shelburne | 802-985-2366 | 154.370 pl: |
| <input type="checkbox"/> | Time | <input type="checkbox"/> Fire, Town of: Starksboro | 802-453-5893 | 155.715 |
| <input type="checkbox"/> | Time | <input type="checkbox"/> Fire, Town of: Huntington | 802-434-2115 | 154.160 pl: |
| <input type="checkbox"/> | Time | <input type="checkbox"/> Fire, Town of: Williston | 802-878-5622 | |
| <input type="checkbox"/> | Time | <input type="checkbox"/> Police, Town of: Shelburne | 802-985-8051 | 453.150 |
| <input type="checkbox"/> | Time | <input type="checkbox"/> Vermont State Police: Williston | 802-878-7111 | 460.225 |
| <input type="checkbox"/> | Time | <input type="checkbox"/> EMS, Town of: | | |
| <input type="checkbox"/> | Time | <input type="checkbox"/> Public Works Town of: | | |
| <input type="checkbox"/> | Time | <input type="checkbox"/> Public Works Town of: | | |
| <input type="checkbox"/> | Time | <input type="checkbox"/> Public Works Town of: | | |
| <input type="checkbox"/> | Time | <input type="checkbox"/> Public Works Town of: | | |
| <input type="checkbox"/> | Time | <input type="checkbox"/> Public Works Town of: | | |
| <input type="checkbox"/> | Time | <input type="checkbox"/> Public Works Town of: | | |
| <input type="checkbox"/> | Time | <input type="checkbox"/> Power Company: Vermont Electric | 1-800-832-2667 | |
| <input type="checkbox"/> | Time | <input type="checkbox"/> Power Company: Green Mt Power | 1-888-835-4672 | |
| <input type="checkbox"/> | Time | <input type="checkbox"/> Fuel Company: Hart & Mead | 802-482-2421 | |
| <input type="checkbox"/> | Time | <input type="checkbox"/> Fuel Company: Patterson Fuels | 802-434-2616 | |
| <input type="checkbox"/> | Time | <input type="checkbox"/> Phone Company: | | |
| <input type="checkbox"/> | Time | <input type="checkbox"/> CERT: | (800) 347-0488 | |
| <input type="checkbox"/> | Time | <input type="checkbox"/> Other: | | |
| <input type="checkbox"/> | Time | <input type="checkbox"/> Other: | | |
| <input type="checkbox"/> | Time | <input type="checkbox"/> Other: | | |

Local Support Function #1 - Transportation

Assets in support of the movement of emergency resources, including the evacuation of people and distribution of food and supplies.

Local Transportation Resources:

Local School Bus Companies:

Company Contact Info:

In Town Drivers:

Local Car Pools:

Contact Info:

Local ATV/Snowmobile club or ATV/snowmobile owners

Contact Info:

Local Truck Drivers:

Owner/Operator Info:

Regional Transportation Resources

School Bus Companies:

Contact Info:

Resources available:

Any existing agreements (MOU or Mutual Aid):

Regional Taxis

Contact Info:

Any existing agreements (MOU or Mutual Aid):

Regional Transportation Org.

Contact Info:

Resources available:

Any existing agreements (MOU or Mutual Aid):

Private Bus Companies

Contact Info:

Resources available:

Any existing agreements (MOU or Mutual Aid):

Off Road Resources

ATV club

Contact Info:

Resources available:

Any existing agreements (MOU or Mutual Aid):

Snowmobile clubs

Contact Info:

Resources available:

Any existing agreements (MOU or Mutual Aid):

Other transportation resources:

Ferries/Charter Boats

Contact Info:

Resources available:

Any existing agreements (MOU or Mutual Aid):

Local Support Function #2 - Communications

Includes emergency warning, information and guidance to the public and responders. Includes resources and back-up resources for all means of communication.

Local Radio Resources:

For local radio resources, please see Appendix B2 of the Local Emergency Operations Plan – Communication Plan

In this communications plan, consider including the following frequencies:

- Local Fire Department: Dispatch Channel, Tactical Channel, Water Supply Channel, Traffic Control Channel, Repeater Channels
- 1st Response/Rescue: Dispatch Channel, Ambulance Response Channel, Hospital Communications Channel
- Police: Dispatch Channel, Tactical Channel
- Highway / DPW: Inter-Truck Channel
- Schools: Primary Channel, Playground Channel

Local Radio Operators

RACES (Radio Amateur Civil Emergency Service): 1-800-347-0488

Local contact info (name, phone #, call #):

Available services/capabilities:

Regional Radio Communications:

ACFA Adopted Frequencies (channel, common name, frequency):

Other Fire Frequencies:

EMS Frequencies:

Hospital/other (common name and frequency):

Law Enforcement Frequencies:

Radio frequencies monitored by VT State Police/Sheriff Dept:

Highway Crews/DPW:

Schools/College:

Telephone Coverage:

Local Phone services Main Office and Emergency Phone contact info:

Emergency Communications:

EAS Activation: Contact DEMHS 1-800-347-0488

National Weather Service Phone # (Emergency broadcasts)

NWS Burlington (800) 863-4279

NWS Albany 1-518-435-9580

Radio Servicing:

Company name, Phone #:

Local Support Function #3 – Public Works & Engineering

Resources in support of debris clearance, road, highway, bridge repairs and restoration of essential public works systems and services and the safety inspection of damaged public buildings.

Highway Department:

Primary Contact Person (Name, Phone #, Radio, Cell):

Secondary Contact Person (Name, Phone #, Radio, Cell):

Home office (Location, Phone #, Radio, etc):

Equipment List:

Vehicles (Type, Designation #, Radio #)

Equipment (Type, Designation #, Radio #)

Other (culvert thawer, generator, etc.)

Water Department:

Primary Contact Person (Name, Phone #, Radio, Cell):

Secondary Contact Person (Name, Phone #, Radio, Cell):

Home office (Location, Phone #, Radio, etc):

Water Plant (location, Phone #):

Water Tank locations:

Equipment List:

Vehicles (Type, Designation #, Radio #):

Equipment (Type, Designation #, Radio #):

Other (generator, etc.):

Critical Valve locations (main valves to shut down portions of system if needed):

Emergency water supply locations (in the event of system failure, where residents could go to fill containers. These would be opened 1st):

Sewer Department:

Primary Contact Person (Name, Phone #, Radio, Cell):

Secondary Contact Person (Name, Phone #, Radio, Cell):

Home office (Location, Phone #, Radio, etc):

Sewer Plant (location, Phone #):

Pump Station locations:

Equipment List:

Vehicles (Type, Designation #, Radio #):

Equipment (Type, Designation #, Radio #):

Other (generator, etc.):

Pre-Designated Contractors: (Include Information for each Contractor)

Primary Contact Person (Name, Phone #, Radio, Cell):

Secondary Contact Person (Name, Phone #, Radio, Cell):

Home office (Location, Phone #, Radio, etc):

Equipment List:

Vehicles (Type, Designation #, Radio #):

Equipment (Type, Designation #, Radio #):

Other (culvert thawer, generator, etc.):

Include copies of rates and any agreements in place (or where they can be found):

Mutual Aid Agreements in Place:

Include any signed Mutual Aid Agreements and Rates with other Towns and/or other entities (large businesses with many resources)

Highway Priority List:

Which roads must be kept open and/or cleared first (have the Select Board identify roads that:

1. Serve a large number of residents
2. Serve as through roads important to the region
3. Serve special needs residents (elderly, handicap)

Written Policy Adopted by Selectboard? (Yes/No Location)

Local Support Function #4 – Fire Resources

Resources in support of structural and wildfire firefighting.

Local Fire Resources:

Fire Chief:

Fire Department Members list (include contact info and training):

Fire Department Vehicle List (include radio designation and capabilities):

Fire Department Equipment List (generators, SCBA, etc.):

Fire Department SOG's/SOP's:

Mutual Aid Agreements:

Pre-Planned responses:

Local Forest Fire Warden:

Regional Fire Resources:

Mutual Aid Depts. (include manpower, equipment, capacities):

Regional/County Resource contact info (Mobile Command Post, Decon Trailer, Mass Casualty Trailer, etc):

State Forest & Parks (Wildfire contact info): Call DEMHS (800)-347-0488

American Red Cross (family assistance):

CERT: To request deployment, call DEMHS (800)-347-0488

Local Support Function #5 – Emergency Management, Recovery & Mitigation

Resources in support of the local Incident Commander through a Local Emergency Operations Center. Includes personnel resources available to provide overall coordination of the town's emergency operations. Resources may serve as a remote ICS planning section to collect, analyze and disseminate critical information on emergency operations for decision making purposes. May provide liaison with state/federal government.

Town Contacts:

Local EMD (contact info):

Deputy EMD (contact info):

Select Board (Names & contact info):

Primary, Secondary, and Tertiary EOCs (Please complete Planning Task #3 of the Local EOP):

Emergency Management Info:

Disaster Declaration Forms: (Please see appendix A1 of the Local EOP)

Financial Accounting Forms:

Local Support Function #6 – Mass Care, Food & Water

Resources available to coordinate sheltering, feeding and first aid for disaster victims.

Local Contacts:

Local Shelter Coordinator (contact info):

Trained Shelter Operator List (name, contact info):

Select Board (Names & contact info):

Local Shelter Info (for each shelter):

Please complete Planning Task #6 of the Local EOP.

Local Shelter Resources:

Food Resources:

Hotel/Motel/B&B Resources:

Meals on Wheels (local contacts):

Church auxiliary:

Regional Shelter Resources:

Red Cross Regional Office (Phone #)

Shelter Trailer (Contact info & capacity)

Porta Potties:

Tents/supplies:

Food Resources:

Hotel/Motel/B&B Resources:

Local Support Function #7– Resource Support

Assets available for coordination and documentation of personnel, equipment, supplies, facilities and services used during disaster response and initial relief operations.

Resource Contacts:

Vermont Division of Emergency Management and Homeland Security (DEMHS):
1-800-347-0488 (24 hr phone #)

CERT: Contact DEMHS (1-800-347-0488)

Tracking Resources:

Volunteer sign-in sheets (attach)
Financial reporting forms (attach)
Equipment deployment lists (attach)
Personnel deployment lists (attach)

Local Support Function #8– Health & Medical Services

Resources for care and treatment for the ill and injured. Includes lists of trained health and medical personnel and other emergency medical supplies, materials and facilities. Assets include public health and environmental sanitation services, disease and vector control guidelines and resources for the collection, identification, and protection of human remains.

Local Contacts:

Rescue Squad/1st Response contact info:

Town Health Officer contact info:

Deputy THO contact info:

Location of town special needs list and access procedures:
(Please complete Planning Task #1 of the Local EOP)

List and contact info of MD's and Nurses who live in town:

Regional Contacts:

Physical Health:

Hospital contact info:

Mutual aid ambulance emergency #:

Mutual aid ambulance non-emergency contact info:

Air Med-Evac:

Nursing home/residential care info:

Pharmacy contact info:

Medical Examiner contact info:

Local funeral home contact info.

Other mortuary info. (large coolers, refrigerated trucks, etc):

Mental Health:

Schools and Children Crisis Counseling
Critical Incident Stress Management (CISM)
Suicide Prevention in Disaster
Emergency/ Disaster Response Team

Other Resources: Via DEMHS 1-(800) 347-0488

Copy of District Mass Casualty Plan: (attach)

Location and contact info for regional MCI Trailer

Local Support Function #9– Search and Rescue

Resources locally available to locate, identify and remove persons from a stricken area, including those lost or trapped in buildings and other structures. Also includes resources to coordinate S&R for those lost in non-inhabited areas.

Local Resources:

Local Fire Department:

Local Rescue Squad/1st response:

Local Law Enforcement:

Local ATV/Snowmobile club or ATV/snowmobile owners:

Other contacts:

Town Maps: Please include on page 7 of the Local EOP

Regional Resources:

Technical Rescue:

Boats:

Ice Rescue:

Fire:

EMS:

Police:

ATV or Snowmobile clubs for off-road searches:

Other Resources:

American Red Cross: 1-800-660-9130

CERT: Please contact DEMHS (800-347-0488)

Civil Air Patrol: Please contact DEMHS (800-347-0488)

Coast Guard: Please contact DEMHS (800-347-0488)

Urban Search & Rescue Strike Teams (Rope & Tech Rescue. Also: Trench Rescue, Water Rescue, Confined Space, Structural Collapse.): Please contact DEMHS (800-347-0488)

Local Support Function #10– Hazardous Materials

Resources available for response, inspection, containment and cleanup of hazardous materials.

In-Town Contacts:

Local Public Alert/Warning System: (siren, 211, etc):

Local Fire Department call-out process:

Local Rescue Squad/1st response:

Local Law Enforcement call-out process:

Known storage sites in town:

In-Town Clean-up Caches:

State Contacts:

HAZMAT Hotline and Regional Decon Team (for initial report of spill): 1-800-641-6005

Agency of Natural Resources Spill Response Team: Please contact DEMHS (800-347-0488)

National Weather Service Phone # (Emergency broadcasts)

NWS Burlington (800) 863-4279

NWS Albany 1-518-435-9580

Request a Spot Forecast: http://www.weather.gov/btv/spot_instructions

All other state agencies: Please contact DEMHS (800-347-0488)

Contractors:

Attachments:

Local Support Function #11– Agriculture and Natural Resources

Locally available assets for use in coordinated response in the management and containment of communicable diseases in an animal health or plant emergency.

Local Ag/Natural/Cultural Resources Info:

In-Town Veterinarians:

Town Health Officer:

Town Animal Control Officer:

Town Pound/Animal Shelter (including capacity):

Available Large Animal Shelter (including capacity):

Large Animal Transport (including capacity):

Local Ag Suppliers:

Town Tree Warden:

Town Cultural Resources:

Regional Ag Contacts:

List of local Veterinarians (including specialties):

Local Animal Hospitals:

Local animal shelter/boarding facilities (including capacity):

County Extension Agent:

Department of Health District Office:

Animal Rescue Resources:

Large Animal Technical Rescue Unit –Equine, Bovine, etc.:

Animal Disaster Response (Regional):

Animal Disaster Response (Statewide): Please contact DEMHS (800-347-0488)

Large Animal Transport:

Ag Suppliers:

Feed Suppliers:

Milk Transport:

Fuel Suppliers:

Equipment Suppliers:

Agricultural Chemicals:

Important State Ag Contacts:

Please contact DEMHS (800-347-0488)

Other Ag information:

Carcass removal/disposal guidelines (attach)

Sanitation guidelines (attach)

Important Cultural Resources Contacts:

Regional Cultural Resources Exposures:

Local Support Function #12– Energy

Assets available for the emergency repair and restoration of critical public energy utilities. Includes locally available back-up power resources. Coordinates the rationing and distribution of emergency power and fuel.

Emergency Information:

Town Energy Coordinator:

List of critical facilities (where electricity must be returned 1st):

List of special needs people who require power for survival:

Town-Owned Energy Resources:

Fuel:

Generators:

Other:

In Town Energy Resources:

In Town filling stations:

In Town fuel Suppliers:

In Town Generators:

In Town Electricians:

In Town Plumbing/Heating Contractors:

Regional Contacts:

Power Companies:

Fuel Suppliers:

Propane Suppliers:

Generators:

Electricians:

Plumbing and Heating Contractors:

Local Support Function #13– Law Enforcement

Assets used for the protection of life and property by enforcing laws, orders and regulations.
Resources available for area security, traffic and access control.

Local Resources:

Town Constable/s:

Police Department:

Important Contacts:

VSP Local:

VSP Public Safety District level:

Nearby Police Departments:

County Sheriff:

Local private security resources:

Mobile Command Post:

Specialty Team Information:

(Activate through DEMHS 1-800-347-0488 or VIA local VSP)

Canine Units (Agency, contact info and capabilities):

Bomb Squad (Not for military products):

Dive Teams (Agency, contact info, Federal Type Level):

Crowd Control/Riot (Agency, contact info, Federal Type):

Attachments:

Attach any existing Mutual Aid Agreements:

Available resources belonging to each agency listed:

Local Support Function #14– Public Information

Pre-identified personnel and resources used for effective collection, control and dissemination of public information to inform the general public of emergency conditions and available assistance.

Town Designated Public Information Officer

In-Town Public Alert Systems

Local Siren

Primary contact (phone, radio, other):

Secondary contact (phone, radio, other):

Meaning of horn(s) to the public (short description):

* Note: consider how the meaning of the horn(s) will be made clear to the public

Public Posting

Location of local notice boards:

Location of portable sign boards:

Door-to-Door Alerts

Lead person / agency contact (phone, radio, other):

Map of town (to divide the town into assigned areas):

List of volunteers willing to assist:

Calling tree

Contact information to initiate calling trees:

Other Contact Information

Contact information for ongoing emergency information:

Vermont 2-1-1: dial 2-1-1

Area Television Stations (including call sign):

Area Radio Stations (including call number and letters):

Area Newspapers:

EAS/EBS notifications: Please contact DEMHS (800-347-0488)

Weather alerts through Weather Service: 800 863-4279

Sample Media Communication

Sample press release:

Press release fax number:

* ALL information released to media/public must be cleared by Incident Commander(s)*

NIMS Adoption Document for

TOWN OF HINESBURG

**DESIGNATION OF THE NATIONAL INCIDENT MANAGEMENT SYSTEM (NIMS) AS
THE BASIS FOR ALL INCIDENT MANAGEMENT IN THE TOWN OF HINESBURG**

WHEREAS, Homeland Security Directive (HSPD)-5 directed the Secretary of the Department of Homeland Security to develop and administer a National Incident Management System (NIMS) to provide a consistent nationwide approach for federal, state, local, and tribal governments to work together to prevent, prepare for, respond to and recover from domestic incidents, regardless of cause, size or complexity; and

WHEREAS, Presidential Policy Directive (PPD)-8 describes the approach to national preparedness, including the National Preparedness System, as the instrument the nation will employ to build, sustain, and deliver core capabilities; and

WHEREAS, the NIMS standardized procedures for managing personnel, communications, facilities and resources improve the TOWN OF HINESBURG ability to utilize federal funding to enhance local and state agency readiness, maintain first responder safety, and streamline incident management processes; and

WHEREAS, the Incident Command System components of NIMS are integral to various incident management activities, including emergency management training programs.

NOW, THEREFORE, I, _____, of THE TOWN OF HINESBURG by the virtue of the authority vested in me by the Constitution and Laws of STATE OF VERMONT, do hereby establish the National Incident Management System (NIMS) as THE TOWN OF HINESBURG standard for incident management.

GIVEN under my hand and the Privy Seal of HINESBURG
this _____ day of _____ in the year Two Thousand and _____.

BY /s/ _____