



2020 | Evacuation Checklists & Forms

Evacuation Plan Part 2

Who:
SME, EOC, CAO

Part 2:

- Evacuation Briefing Summary
- Master Decision Log
- Detailed Decision Record

Part 3:

- Protective Measures and Decision Makers
- Protective Measures Matrix
- Initial Evacuation Actions
- BCEMS Goals

Who:
EOC, Mayor/Council

Part 2:

- Task # Request Worksheet
- Evacuation Alert
- Evacuation Order
- Evacuation Rescind
- State of Local Emergency

Part 3:

- Extraordinary Emergency powers

Who:
EOC, Department Heads

Part 2:

- Personnel Activation Scripts
- Resource Request

Part 3:

- Actions and Roles by Dept.
- Evacuation Personnel Callout
- SME by Hazard Type
- Initial Evacuation Actions

Who:
EOC

Part 2:

- Evacuation
- Evacuation

Part 4:

- Resource M
- Rec
- Egr
- Tra

Traffic Control & ESS Assign

Who:
EOC or Incident Commander

Part 2:

- Site Assignment Briefing
- Evacuee Information Pamphlet

Part 5:

- Field Reference Guide
- Assignment Briefing
- Evacuation Situation Map
- Personnel Check-in Log

Notification Assignments

Who:
EOC or Site Commander

Part 2:

- Site Assignment Briefing
- Evacuee Information pamphlet

Part 4:

- Evacuation Situation Map
- Sector Index
- Assignment Area Index
- Assignment Area Layout

Part 5:

- Field Reference Guide
- Assignment Briefing
- Evacuee Resources
- Multi-Family Building Guidelines
- Reluctant Evacuees
- Unaccompanied Minors
- Temporary Access to Evac area
- Notification Instructions
- Notification Log
- Personnel Check-in Log

Public Com

Who:
EOC

Part 2:

- Evacuation Messaging Te

Part 3:

- Public Notifi Methods
- Evacuation Messaging



Security Assignments

Who:
EOC or Incident Commander

Part 2:

- Site Assignment Briefing
- Evacuee Information Pamphlet

Part 5:

- Field Reference Guide
- Assignment Briefing

Transportation

Who:
EOC, BC Transit

Part 2:

- Transportation Request
- Transportation Resource Tracking
- Transportation Request Tracking

Part 3:

Site Support

Who:
EOC, Incident Commander

Resources/Templates:

- Extraordinary Evacuee Authorization
- Temporary Access Guideline
- Reluctant Evacuee

Decision

Who:
SME, EOC, M

Part 3:

- Protective Decision M
- Protective Matrix



Document Orientation

Purpose

This document complements existing processes and procedures and provides additional information specific to evacuation.

This document is one of five parts to the Evacuation Plan:

1. Concept of Operations
2. **Checklists & Forms**
3. Resources
4. Mapping
5. Site Commander Guide

Organization

The document has four phases:



Document Format

CHECKLIST

Every phase begins with a checklist that includes the objective, resources available and tasks to complete.

FORMS/TEMPALTES

Following each checklist is a series of forms and templates. For each form there is the following:

- Instructions (diagonal pattern on right hand margin),
- A completed sample (orange banner on righthand side),
- Blank form to be completed.



Version History: Checklists and Forms

Version	Description	Updated by	Date
0.1	Final	Logic League Consulting Ltd.	2020 07 26



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DECISION PHASE CHECKLIST

Outcome:

To build situational awareness to decide on appropriate protective actions.

Decision Inputs

Hazard Information (verbal or written from Site)

Risk Information (verbal or written from Site)

Part 2

- Evacuation Briefing Summary
- Master Decision Record
- Detailed Decision Record

Part 3

- Protective Measures Summary
- Protective Measures Matrix
- BCEMS Goals
- Subject Matter Expert by Hazard Type
- Initial Evacuation Actions
- Actions and Roles by Department

Part 4

- Sector Index

Part 5

- N/A

Scenario 1: Protective Actions are recommended

(Who: Incident Commander or Subject Matter Expert recommending to Emergency Operations Centre, CAO or Emergency Program Coordinator/Manager)

ACTION

- 1. Complete Evacuation Briefing Summary
- 2. Document decisions

Scenario 2: Protective Actions need to be decided

(Who: EOC to complete with assistance of Incident Commander or Subject Matter Expert)

ACTION

- 1. Complete Evacuation Briefing Summary
as required refer to:
 - Protective Measures and Decision Makers*
 - Protective Measures Matrix*
 - Subject Matter Expert by Hazard Type*
- 2. Document decisions



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Evacuation Briefing Summary Instructions

Use/ Purpose

Used to record details about:

- What is happening,
- The impacts and,
- What action(s) are being recommended/approved.

Who/ Responsibility

Information will be provided by either the Incident Commander (e.g. Fire, Police, Public Works) or a Subject Matter expert (e.g. BC Wildfire Service or a geotechnical engineer)

Information will be received by Fire Duty Chief, Police Watch Commander, CAO or EOC Director.

Instructions

General

- Complete with the information that is available, then discuss how, when and who will fill in relevant information gaps.

Part 1: Situation

- Attain as much information and detail as is available.

Part 2: Impacts

- Refer to *Summary of Protective Actions* for additional information

Part 3: Actions

- Record which protective actions have been recommended and by whom.
- Refer to Summary of Protective measures for authorized decision makers

Part 4: Internal notification

- Record who has been notified of the situation, impacts and decisions



Recommended to be completed by:
 Incident Commander OR Emergency Program Coordinator

Evacuation Briefing Summary

Date: (yyyy/mm/dd)	2020/01/20	Time: (24 Hr Clock)	15:25
Provided by: (first, last name; position)		Received by: (first, last name; position)	

Part 1: Situation

What is going on? (type of hazard)	Wildfire		
Is it spreading?	Rate	Direction	Expected to
	Unknown	Moving in South East direction	<input checked="" type="checkbox"/> Increase <input type="checkbox"/> Decrease <input type="checkbox"/> Constant
Is the situation:	<input checked="" type="checkbox"/> Deteriorating <input type="checkbox"/> Stabilizing <input type="checkbox"/> Improving	Describe: Wildfire is spreading from Sooke towards Metchosin	

Part 2: Impacts

When people or egress routes be impacted? (Recommended action)	Geographical boundaries (addresses/street names)
Now (Shelter-in-place)	
0-6 hours (Tactical Evac)	
6-24 hours (Evacuation Order)	All Metchosin properties NORTH of SOOKE RD
24+ hours (Evacuation Alert)	Kangaroo Rd from Sooke Rd to Lindholm Rd All of Badger Pl, Wallaby Dr.

Part 3: Actions

	Recommended	Approved	N/A	Who made the Recommendation/Approved? (name, position, organization)
Tactical Evacuation	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	John Smith, Duty Fire Chief, Metchosin
Evacuation Alert	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Samantha Miller, CAO, Metchosin
Evacuation Order	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fran Baker, Mayor, Metchosin
Shelter-in-Place	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Evacuation Rescind	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Part 4: Response Sites

Site Type	Address	Commander (Name)	Contact
Incident Command Post	4440 Happy Valley Rd.	Joe Smith	555.654.3219
Staging Area	4440 Happy Valley Rd.	TBD	TBD
Emergency Ops Centre	4440 Happy Valley Rd.		

SAMPLE



Evacuation Briefing Summary

Date: (yy/mm/dd)		Time: (24 Hr Clock)	
Provided by: (first, last name; position)		Received by: (first, last name; position)	

Part 1: Situation

What is going on? (type of hazard)			
Is it spreading?	Rate	Direction	Expected to
			<input type="checkbox"/> Increase <input type="checkbox"/> Decrease <input type="checkbox"/> Constant
Is the situation:	<input type="checkbox"/> Deteriorating <input type="checkbox"/> Stabilizing <input type="checkbox"/> Improving	Describe:	

Part 2: Impacts

When people or egress routes be impacted? (Recommended action)	Geographical boundaries (addresses/street names)
Now (Shelter-in-place)	
0-6 hours (Tactical Evac)	
6-24 hours (Evacuation Order)	
24+ hours (Evacuation Alert)	

Part 3: Actions

	Recommended	Approved	N/A	Who made the Recommendation/Approved? (name, position, organization)
Tactical Evacuation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Evacuation Alert	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Evacuation Order	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Shelter-in-Place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Evacuation Rescind	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Part 4: Response Sites

Site Type	Address	Commander (Name)	Contact
Incident Command Post			
Staging Area			
Emergency Ops Centre			



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Master Decision Record Instructions

Use/ Purpose

A brief summary of important decisions. A *Detailed Decision Record* should also be considered as time permits.

Who/ Responsibility

EOC Positions such as the Director, Operations Chief, Planning Chief may play an active role in completing this form. If a scribe is available, this may be a good task for them to monitor and complete.

Instructions

General

- Note: A “decision” can be an approval, denial.

Field	Content	Example
Date	Record the date that the decision was made. YYYY/MM/DD	2020/01/15 2020/09/17
Decision	Summarize the decision that has been made.	Approved Evacuation Alert, Denied request for helicopter evacuation,
Decision Maker	Enter the First, Last name	John, Doe, Jane Smith
Area	The geographical or functional area that the decision impacts	Main street from 1 st Ave to 8 th Ave, EOC Planning Section
Org/Position	The organization and position of the decision maker	Municipality X / EOC Director



Master Decision Record

Local Government	District of Metchosin
Event Name	Wildfire 2020
Task Number	123456

Date	Time				
2020/01/20	15:20	Decision	Recommend to Mayor, implementing an Evacuation Order for areas threatened by wildfire	Area	North West Metchosin
		Decision Maker	John Smith	Org/Position	Metchosin Fire/ Incident Commander
2020/01/20	15:45	Decision	Evacuation Order and State of Local Emergency Approved	Area	
		Decision Maker	Fran Baker	Org/Position	Metchosin, Mayor
		Decision		Area	
		Decision Maker		Org/Position	
		Decision		Area	
		Decision Maker		Org/Position	
		Decision		Area	
		Decision Maker		Org/Position	
		Decision		Area	
		Decision Maker		Org/Position	
		Decision		Area	
		Decision Maker		Org/Position	
		Decision		Area	
		Decision Maker		Org/Position	



Master Decision Record

Local Government	District of Metchosin
Event Name	
Task Number	

Date	Time				
		Decision		Area	
		Decision Maker		Org/Position	
		Decision		Area	
		Decision Maker		Org/Position	
		Decision		Area	
		Decision Maker		Org/Position	
		Decision		Area	
		Decision Maker		Org/Position	
		Decision		Area	
		Decision Maker		Org/Position	
		Decision		Area	
		Decision Maker		Org/Position	
		Decision		Area	
		Decision Maker		Org/Position	
		Decision		Area	
		Decision Maker		Org/Position	



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Detailed Decision Record Instructions

Use/ Purpose

A record of decisions that provides more detail and justification than the *Master Decision Record*

Who/ Responsibility

A “Scribe” is a prime candidate for completing this form, but it can be completed by anyone involved with the decision.

Instructions

Field	Content	Example
Date	Record the date that the decision was made. (YYYY/MM/DD)	2020/01/15 2020/09/17
Time	Record the time that the decision was made. (24-hour clock)	08:30 12:30 16:30
Decision (Outcome)	Check the box that describes the decision. If the decision was not an approval or denial, use the third “blank” to describe	(check appropriate box)
Decision (describe)	Summarize the decision that has been made.	Approved Evacuation Alert for area including “Area description 1” and “Area Description 2”
Authority (Legislation)	What legislation, regulation, bylaw, or policy provides the authority for the decision	Emergency Program Act State of Local Emergency, Evacuation Order
Authority (Decision Maker)	Record the First, Last name of the decision maker and their organization and position	John, Doe; District of Metchosin EOC Director Jane, Smith; EMBC, PREOC Ops Chief
Risks	Note what the risks of action and inaction are.	People become trapped if not evacuated. Compliance with future Evacuation Order decreased if hazard does not cause widespread impacts.
Necessary	Why was the decision deemed appropriate and required?	If evacuation delayed, risks would increase due to increased danger of nighttime evacuation.
Other Approvals Required	List any additional approvals that are required, including the decision maker’s position and organization	Section 7 Instream works permit, Ministry of FLNRORD via Emergency Management BC



Recommended to be completed by: EOC Planning or Scribe

Detailed Decision Record

Date	2020/01/20
Time	15:45
Event Name	Wildfire 2020
Task Number	123456

Decision	(Outcome) <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> _____	(Describe) State of Local Emergency and Evacuation Order for area threatened by wildfire
-----------------	--	---

Authority	(what legislation policy guided, enabled the decision) Emergency Program Act	(decision maker First, Last Name; Organization, Position) Samantha Miller; Metchosin, CAO
------------------	---	---

Risks	(What are the potential risks associated with the decision?) People's health and safety are threatened by approaching wildfire Structures and infrastructure are threatened by approaching wildfire Transportation infrastructure may become impacted by wildfire or response operations
--------------	---

Necessity BCEMS goal?	(Why is the decision necessary?) People and structures may be negatively impacted by wildfire burning or smoke impacts. It is unsafe for people to stay in the area (life safety)
------------------------------	--

Other Approval Required (if any)	(Description, Position, Organization) State of Local Emergency. Must be approved by Mayor or Mayor and council
---	--

SAMPLE



Detailed Decision Record

Date	
Time	
Event Name	
Task Number	

Decision	(Outcome) <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> _____	(Describe)
-----------------	---	------------

Authority	(what legislation policy guided, enabled the decision)	(decision maker: First, Last Name; Organization, Position)
------------------	--	--

Risks	(What are the risks for and against the decision?)
--------------	--

Necessary	(Why is the decision necessary?)
------------------	----------------------------------

Other Approval Required (if any)	(Description, Position, Organization)
---	---------------------------------------



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ACTIVATION PHASE CHECKLIST

Outcomes:

Attain authorization for Planned Evacuation.
Mobilize personnel to assist with evacuation.

Activation Inputs

Evacuation Briefing Summary
Record of Decision

Emergency Response and Recovery Plan
EOC Contact list(s)

Part 2

- Task Number Request Worksheet
- Evacuation Alert Template
- Evacuation Order Template
- State of Local Emergency Template
- Personnel Activation Worksheets
- Personnel Contact Log
- Mutual Aid Request Worksheet
- Resource Request Template

Part 3

- Evacuation Roadmap
- Protective Measures Summary
- Extraordinary Emergency Powers
- Actions and Roles by Department
- Stakeholders and Partners
- Subject Matter Expert by Hazard Type
- Site Personnel Team Composition
- Door-2-Door Notification Personnel
- Traffic Control Personnel
- Transportation Collection Point Personnel
- Evacuation Personnel & Mutual Aid Contact List
- Mutual Aid Request Worksheet

Part 4

- N/A

Part 5

- N/A

ACTION

1. Attain Approval for Protective Measures

- Determine Decision Maker
- Brief Decision Maker
- Attain and record approval for protective measures
- Call EMBC for Provincial Task #

2. Complete Declarations and Orders

Steps 2 and 3 can occur concurrently

- State of Local Emergency
- Evacuation Alert
- Evacuation Order

3. Mobilize Personnel to Assist

- Complete Personnel Activation Worksheets
- Contact personnel

If needed:

- Plan Mutual Aid Request
- Request Mutual Aid



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Task Number Request Instructions

Use/ Purpose

To prepare to call Emergency Management BC to receive a Task Number

Who

Anyone authorized by the EOC can call on behalf of the municipality.

Traditionally it would be the EOC Director, or the Municipal Emergency Program Coordinator/Manager

How/Mode

Emergency Management BC operates a 24/7 Call Centre named the “Emergency Coordination Centre” or “ECC”

Contact is made via telephone at 1.800.663.3456

Instructions

- 1) Fill out as much of the Provincial Task Number Request Worksheet as possible.
- 2) Call the Emergency Coordination Centre
- 3) The operator will ask a series of questions. As much as possible the worksheet is built to anticipate these questions.
- 4) The Operator may connect you with an On-duty Regional Manager or if active, the Vancouver Island Provincial regional Emergency Operations Centre. They may have additional questions, clarification or suggestions.



Provincial Task Number Request Worksheet

Municipality	District of Metchosin
Your name	Bill Brown
Your Position	Emergency Program Coordinator

Type of emergency	Wildfire
The following actions are being undertaken	<input type="checkbox"/> Tactical Evacuation <input type="checkbox"/> Evacuation Alert <input checked="" type="checkbox"/> Evacuation Order <input checked="" type="checkbox"/> Shelter-in-Place <input type="checkbox"/> Rescues
Emergency Operations Centre activated	<input checked="" type="checkbox"/> YES <input type="checkbox"/> No <input type="checkbox"/> Level 1 <input checked="" type="checkbox"/> Level 2 <input type="checkbox"/> Level 3
Emergency Operations Centre Phone #	(555) 765.4321
Emergency Support Services (ESS) is activated	<input checked="" type="checkbox"/> YES <input type="checkbox"/> No
ESS is providing the Following	<input checked="" type="checkbox"/> Reception Centre <input checked="" type="checkbox"/> Registration and Referral <input type="checkbox"/> Group Lodging <input type="checkbox"/> Other _____
Request that The Province notify:	<input checked="" type="checkbox"/> EMBC Regional Duty Manager <input checked="" type="checkbox"/> Ministry of Children and Family (in case there are unaccompanied minors) <input checked="" type="checkbox"/> Health Emergency Management BC (in case health facilities or care homes are impacted)

Task Number Issued from Emergency Coordination Centre

123456

If Denied, rationale:

N/A

SAMPLE



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Evacuation Alert Instructions

Use/ Purpose

An *Evacuation Alert* is issued as a warning to prepare for an *Evacuation Order*. It provides individuals and families time to prepare to evacuate. There is not always time to issue an *Evacuation Alert*.

When

The decision to issue an Evacuation Alert should be made in consultation between the Incident Commander/Subject matter expert and the EOC.

Who

The Operations section of the Emergency Operations Centre may complete the template.

Alternatively, the Advance Planning Section of the Planning section may pre-emptively complete the template in advance of its need.

Instructions

- 1) Complete Evacuation Alert form (word template below). Templates for alternate languages can be found at: http://bit.ly/evac_templates
- 2) Build map to accompany form.
 - a. Draw yellow polygon over Evacuation Alert Area
 - b. Include date and time
- 3) If time permits send Alert to EMBC for review
- 4) Get signature for Evacuation Alert. The following positions are authorized to sign an Evacuation Alert
 - EOC Director
 - Fire Chief
 - Police Chief
 - CAO
 - Mayor and Council
- 5) Notify public of Evacuation Alert using the following means.
 - Municipal Website
 - News Media
 - Social Media
- 6) Send completed copy of Evacuation Alert to Vancouver Island Provincial Regional Emergency Operations Centre (PREOC) (preoc1.ops1@gov.bc.ca)



EVACUATION ALERT

North West Metchosin

DATE 2020/01/20 TIME 15:45

An Evacuation Alert has been issued by District of Metchosin at the Emergency Operations Centre (EOC).

Because of the increased risks associated with wildfire.

Because of the potential health and safety risks, the District of Metchosin has issued an **Evacuation Alert** for the following areas:

Kangaroo Rd (from Sooke Rd. to Lindholm Rd.)

Wallaby Dr. Badger Pl.

An Evacuation Alert has been issued to prepare you to evacuate your premises or property should it be found necessary. Residents will be given as much advance notice as possible prior to evacuation; however, you may receive limited notice due to changing conditions.

[Provide map or description of potential evacuation route and map of evacuation alert area]

WHAT YOU SHOULD DO:

- Locate all family members and designate a meeting area outside the evacuation area, should an Evacuation Order be called while separated.
- Pack essential items such as government-issued ID, medications, eyeglasses, valuable papers (e.g. insurance, credit, and mortgage information), immediate care needs for dependents and, if time and space permits, keepsakes for quick departure.
- Prepare to move disabled persons, children and/or neighbours, if assistance is needed.
- Prepare to take pets with you and move livestock to a safe area (if possible).
- Arrange transportation for all your household members. Fill the gas tanks of personal vehicles. If transportation assistance is needed, call [555.123.4567](tel:555.123.4567)
- Arrange accommodation for all members of the residence, if possible.
- Wait for an Evacuation Order to be issued before evacuating. Monitor District of Metchosin website and local news stations for information on evacuation orders and location of Reception Centres.

Further information will be issued at [01/20/20 at 18:00 at Metchosin Elementary 4495 Happy Valley Rd.](#), or visit www.metchosin.ca for more information.

(signature)

Mayor, District of Metchosin



EVACUATION ALERT

DATE _____ AND TIME _____.

An Evacuation Alert has been issued by District of Metchosin at the Emergency Operations Centre (EOC).

Because of the potential danger to life and health, the District of Metchosin has issued an **Evacuation Alert** for the following areas:

An Evacuation Alert has been issued to prepare you to evacuate your premises or property should it be found necessary. Residents will be given as much advance notice as possible prior to evacuation; however you may receive limited notice due to changing conditions.

See map attached

WHAT YOU SHOULD DO:

- Locate all family members and designate a meeting area outside the evacuation area, should an Evacuation Order be called while separated.
- Pack essential items such as government-issued ID, medications, eyeglasses, valuable papers (e.g. insurance, credit, and mortgage information), immediate care needs for dependents and, if time and space permits, keepsakes for quick departure.
- Prepare to move disabled persons, children and/or neighbours, if assistance is needed.
- Prepare to take pets with you and move livestock to a safe area (if possible).
- Arrange transportation for all your household members. Fill the gas tanks of personal vehicles. If transportation assistance is needed, call _____.
- Arrange accommodation for all members of the residence, if possible.
- Wait for an Evacuation Order to be issued before evacuating. Monitor _____ for information on evacuation orders and location of Reception Centres.

Further information will be issued at _____, or visit for more information.

District of Metchosin



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Evacuation Order Instructions

Use/ Purpose

An *Evacuation Order* is an official instruction to leave a defined area due to present or imminent hazards and risks.

When

The decision to implement an Evacuation Order should be made in consultation with the Incident Commander/Subject Matter Expert and the EOC.

Who

The Operations section of the Emergency Operations Centre may complete the template.

Alternatively, the Advance Planning Section of the Planning section may pre-emptively complete the template in advance of its need.

Under a State of Local Emergency, the Emergency Program Act gives the Mayor or Municipal Council the right to evacuate all or part of their jurisdiction. Once a State of Local Emergency has been declared, this power may be delegated.

Note: A State of Local Emergency can only be authorized by the Mayor (Declaration) or by the full Council (Bylaw or Resolution)

If the powers available under a State of Local Emergency are to be delegated, it is recommended that this is done explicitly and in writing.

Instructions

Approval to Evacuate

1. EOC Director
2. Mayor/Council

State of Local Emergency

3. Complete template
4. Build Map
5. EMBC to review (if time permits)
6. Mayor or Council signs
7. Distribute Publicly
8. Send copy to EMBC

Evacuation Order

3. Complete template
4. Build Map
5. EMBC to review (if time permits)
6. Mayor or Council signs
7. Distribute Publicly
8. Send copy to EMBC



EVACUATION ORDER

North West Metchosin

DATE 2020/01/20 TIME 15:45

Pursuant to [Section 12 (1) of the BC *Emergency Program Act* / Band Council] an **Evacuation Order** has been issued by District of Metchosin due to immediate danger to life safety caused by: **Wildfire**

Members of the Police and Search and Rescue teams and other applicable agencies will be expediting this action.

The Evacuation Order is in effect for the following areas:

All Metchosin properties North of Sooke Rd/ Hwy 14

Include map of evacuation area and evacuation route]

YOU MUST LEAVE THE AREA IMMEDIATELY

WHAT YOU SHOULD DO:

- Follow the travel route provided and register at **Metchosin Elementary school**. If you need transportation assistance from the area, advise the person providing this notice or call 555.765.4321.
- Shut off all gas and electrical appliances, other than refrigerators and freezers.
- Close all windows and doors.
- Close gates (latch) but do not lock.
- Gather your family and, if you have room, take a neighbour or someone needing transportation. Do not use more vehicles than you have to.
- Take critical items (medicine, purse, wallet, and keys) only if they are immediately available. Take pets in pet kennels or on leash.
- Do not use the telephone unless you need emergency service.

Further information will be issued at **01/20/20 18:00 at Metchosin Elementary 4495 Happy Valley Rd.** or visit www.metchosin.ca for more information.

(signature)

Mayor, District of Metchosin



EVACUATION ORDER

DATE _____ AND TIME _____

Pursuant to Section 12 (1) of the BC *Emergency Program Act* an **Evacuation Order** has been issued by District of Metchosin due to immediate danger to life safety caused by: _____.

Members of the local police department and other agencies and other applicable agencies will be expediting this action.

The Evacuation Order is in effect for the following areas:

See map attached

YOU MUST LEAVE THE AREA IMMEDIATELY

WHAT YOU SHOULD DO:

- Follow the travel route provided and register at:

- If you need transportation assistance from the area, advise the person providing this notice or call _____.
- Shut off all gas and electrical appliances, other than refrigerators and freezers.
- Close all windows and doors.
- Close gates (latch) but do not lock.
- Gather your family and, if you have room, take a neighbour or someone needing transportation. Do not use more vehicles than you have to.
- Take critical items (medicine, purse, wallet, and keys) only if they are immediately available. Take pets in pet kennels or on leash.
- Do not use the telephone unless you need emergency service.

Further information will be issued at _____, or visit _____ for more information.

District of Metchosin



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State of Local Emergency Instructions

Use/ Purpose

A State of Local Emergency (SOLE), is the legal mechanism to access one or more of the extraordinary powers as outlined in the Emergency Program Act and Local Authority Emergency Management Regulation.

When

The only reason to declare a State of Local Emergency (SOLE) is to access one or more of the extraordinary powers.

Reference: Part 3: Resources. Extraordinary Emergency Powers. Pg. 7

Who

Only the Mayor or the Council can declare a SOLE.

This can be done by:

- Resolution (Mayor or designate)
- Bylaw (Council)

Instructions

The EOC Operations section will likely complete the State of Local Emergency template and present it to Mayor or Council for approval

1. Complete SOLE Template (including a map)
2. Send draft SOLE to EMBC for review (if time permits)
3. EOC Director or CAO present the template to the Mayor or Council
4. Mayor/Council authorizes SOLE
5. Distribute SOLE publicly
6. Send a copy to EMBC

For additional information regarding a State of Local Emergency, see EMBC's : *Declaring a State of Local Emergency in British Columbia*

https://www2.gov.bc.ca/assets/gov/public-safety-and-emergency-services/emergency-preparedness-response-recovery/embc/policies/guidelines-declaring_a_state_of_local_emergency_in_bc.pdf



Declaration of State of Local Emergency ORDER

WHEREAS there is **Wildfire** within the jurisdiction of the District of Metchosin

AND WHEREAS **the wildfire** poses an existing or imminent threat to people and property within the area known as **North West** District of Metchosin.

AND WHEREAS this **Wildfire** emergency requires prompt coordination of action or special regulation of persons or property to protect the health, safety or welfare of people or to limit damage to property.

NOW THEREFORE:

IT IS HEREBY ORDERED pursuant to Section 12 (1) of the *Emergency Program Act* (RS, 1996, Chap 111) that a state of local emergency exists in the District of Metchosin due **to wildfire** and its risk to people and structures;

IT IS FURTHER ORDERED THAT the District of Metchosin, its employees, servants and agents are empowered pursuant to Section 13 (1) of the *Emergency Program Act* to do all acts and implement all procedures that are considered necessary to prevent or to alleviate the effects of the emergency.

ORDERED by the Mayor this date, **2020/01/20**, to remain in force for seven days until **2020/01/26** at midnight unless cancelled by order of Mayor of District of Metchosin or the Minister responsible.

Mayor (name)
District of Metchosin

SAMPLE



Declaration of State of Local Emergency ORDER

WHEREAS there is a _____ within the jurisdiction of District of Metchosin

AND WHEREAS the _____ poses an existing or imminent threat to people and property within the area known as _____.

AND WHEREAS this _____ emergency requires prompt coordination of action or special regulation of persons or property to protect the health, safety or welfare of people or to limit damage to property;

NOW THEREFORE:

IT IS HEREBY ORDERED pursuant to Section 12 (1) of the *Emergency Program Act* (RS, 1996, Chap 111) that a state of local emergency exists in _____ due to _____ and _____;

IT IS FURTHER ORDERED THAT the District of Metchosin, its employees, servants and agents are empowered pursuant to Section 13 (1) of the *Emergency Program Act* to do all acts and implement all procedures that are considered necessary to prevent or to alleviate the effects of the emergency.

ORDERED by the _____ this date, date _____, to remain in force for seven days until date _____ at midnight unless cancelled by order of District of Metchosin (or the Minister responsible).

District of Metchosin



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Personnel Activation Instructions

Gather Resources

- Mobilization Scripts
- Contact List (Page #)

1. Complete Respective Team Mobilization Scripts (pages 43, 47, 53)
2. Contact Respective Lead Agencies to mobilize their team(s).
3. Record who was contacted, when (personnel contact log template)

Municipal Lead Agencies

Team	Contact Method	Lead Agency	Contact Details
Emergency Operations Centre	Phone Tree	Emergency Program	One Call Notification System Activated by: Fire Chief Dunlop Cell: 250.883.4472 Who else?
Notifications	Phone Chief	Police	Westshore RCMP Dispatch 250-704-7300
Traffic Control	Phone Chief	Police	
Security	Phone Chief	Police	
Emergency Support Services (ESS)	Phone (ESS Director)	Emergency Program	Confirm activation number . Once Call?



EOC Activation

This is (your name) Steve Murphy

With District of Metchosin

There is/has been (describe hazard and location) Wildfire occurring in North West part of District of Metchosin

We are evacuating residents as a safety precaution

We are activating the Emergency Operations Centre to support an emergency evacuation. Are you able to assist with any of the following shifts?

(Record responses on *Personnel Contact Log*)

Start Time	End Time	Position(s)
now	00:00	All EOC Shifts
00:00	08:00	EOC Director, Operations and Logistics Staff
08:00	16:00	All EOC Positions

Please report to:

<input checked="" type="checkbox"/> Primary EOC	District Hall	4450 Happy Valley Rd
<input type="checkbox"/> Secondary EOC		
<input type="checkbox"/> Alternate Site		

Next update is expected at: 01/20/20: 18:00

(Record results on Personnel Contact Log Template)

SAMPLE



EOC Activation

This is (your name) _____

With (Metchosin) _____

There is/has been
(describe hazard and location)

We are evacuating residents as a safety precaution

**We are activating the Emergency Operations Centre to support an emergency evacuation.
Are you able to assist with any of the following shifts?**

(Record responses on *Personnel Contact Log*)

Start Time	End Time	Position(s)

Please report to:

<input type="checkbox"/> Primary EOC	Municipal Hall	2167 Metchosin Ave.
<input type="checkbox"/> Secondary EOC	(facility name)	(address)
<input type="checkbox"/> Alternate Site	(facility name)	(address)

Next update is expected at: _____

(Record results on Personnel Contact Log Template)



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Notification Teams Activation

This is (your name) Steve Murphy

With District of Metchosin

There is/has been (describe hazard) Wildfire

We are evacuating residents as a safety precaution

Estimated Properties 80

Estimated Population 150

We require Police to coordinate traffic control, door-to-door notification, and area security.

Are you able to mobilize these teams (if not, who)?

Team	Yes	No	Other (name/position/organization)
Notification	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Traffic Control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Security	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Incident Command is located at:
 Staging Area is established at:
 An Emergency Operations Centre is
 being established at:

Where will you report? _____

How long will it take you to arrive? _____

Next update is expected at: 01/20/20 18:00



Purposely left blank



Notification Teams Activation

This is (your name) _____

With (Metchosin) _____

There is/has been
(describe hazard)

We are evacuating residents as a safety precaution

Estimated Properties _____

Estimated Population _____

We require Police to coordinate traffic control, door-to-door notification and area security

Are you able to mobilize these teams (if not, who)?

Team	Yes	No	Other (name/position/organization)
Notification	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Traffic Control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Security	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Incident Command is located at: (address)

Staging Area is established at: (address)

**An Emergency Operations Centre is
being established at:** (address)

**Where will you
report?**

**How long will it take
you to arrive?**

**Next update is
expected at:**



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ESS Activation

This is (your name) Steve Murphy

With District of Metchosin

There is/has been (describe hazard) Wildfire in North West District of Metchosin

We are evacuating residents as a safety precaution

We are activating the ESS team to: (check all that apply)

- Provide registration and referrals
- Provide emotional support
- Open a Reception Centre
- Open Group Lodging

Are you able to activate the ESS team? Yes No

ESS Staging will occur at:		
	Facility Name	Address
<input checked="" type="checkbox"/> Emerg Prgm	Fire Hall #1	1703 Monterey Ave.
<input type="checkbox"/> Reception Cntr		
<input type="checkbox"/> Alternate Site		

How long will it take you to activate? _____

Next update is expected at: 01/20/20 18:00



Purposely left blank



ESS Activation

This is (your name) _____

With (Metchosin) _____

There is/has been
(describe hazard)

We are evacuating residents as a safety precaution

We are activating the ESS team to: (check all that apply)

- Provide registration and referrals
- Provide emotional support
- Open a Reception Centre
- Open Group Lodging

Are you able to activate the ESS team? Yes No

ESS Staging will occur at:		
	Facility Name	Address
<input checked="" type="checkbox"/> Emerg Prgm	Fire Hall #1	1703 Monterey Ave.
<input type="checkbox"/> Reception Cntr		
<input type="checkbox"/> Alternate Site		

How long will it take you to activate? _____

Next update is expected at: _____



Purposely left blank



Personnel Contact Log Instructions

Use/ Purpose

TO record who has been called and when they are available to respond.

Who

In an EOC this is a Logistics task.

Until the EOC Section is staffed, this may fall to the Fire Duty Chief, Police Watch Commander, Emergency Program Coordinator/Manager

Or Delegated as appropriate.

Instructions

General

Use a separate sheet for EOC, Police and ESS personnel. (Circle appropriate team in top left box)

“Available”	Use these fields to indicate when personnel are available to arrive. Assume a minimum of an 8 hour shift.
“Confirmed Shift”	Once someone is confirmed record their start and end time
“Time Contacted”	Record the time that contact was made with the individual.



Personnel Contact Log

*For EOC Personnel track shifts
 *For all others record reason for calling in notes section

Municipality	District of Metchosin
Date	01/20/20
Name (individual filling out form)	Charles, Garcia

	Name (First, Last)	Available						Confirmed shift start time	Time contacted	Notes
		Now	1-3 hrs	3-8 hrs	8-24hrs	24-48hrs	48+ hrs			
1	Bill, Smith	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Now- 00:00	15:58	
2	Jane, Smith	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Now- 00:00	15:58	
3	Alex, Kim	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	00:00-08:00	16:02	
4	Erica, Smith	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	None		Activate Police
5	Jennifer, Schmit	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			Activate ESS
6		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
7		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
8		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
9		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
10		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
11		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
12		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
13		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
14		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
15		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
16		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
17		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
18		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			



Personnel Contact Log

*For EOC Personnel track shifts
 *For all others record reason for calling in notes section

	Municipality	District of Metchosin
	Date	
	Name (individual filling out form)	

	Name (First, Last)	Available						Confirmed shift start time	Time contacted	Notes
		Now	1-3 hrs	3-8 hrs	8-24hrs	24-48hrs	48+hrs			
1		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
2		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
3		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
4		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
5		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
6		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
7		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
8		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
9		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
10		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
11		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
12		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
13		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
14		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
15		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
16		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
17		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
18		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			



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Mutual Aid Request Worksheet Instructions

Use/ Purpose

This worksheet can be used to gather information about what assistance is required prior to requesting mutual aid.

Who

In an EOC this is a Logistics task.

Until the EOC Section is staffed, this may fall to the Fire Duty Chief, Police Watch Commander, Emergency Program Coordinator/Manager

Or Delegated as appropriate.



Mutual Aid Request Worksheet

Below questions can be considered and information included in a resource request.

Context/ what needs to be done?	Provide Door-2-door evacuation notifications
Required training/skills?	Preferred: ICS 100
How many personnel are required?	20
When are they needed?	ASAP
How long are they needed?	8 hours
Where should they report?	Staging Area
Who should they report to?	John Smith, Incident Commander
Restrictions to travel/access?	Access from South
What supplies can they bring with them?	
What personal supplies should they bring with them?	Clothing to work outside, footwear to walk for extended periods of time. Personal water bottle and snacks.
Other?	



Mutual Aid Request Worksheet

Below questions can be considered and information included in a resource request.

Context/ what needs to be done?	
Required training/skills?	
How many personnel are required?	
When are they needed?	
How long are they needed?	
Where should they report?	
Who should they report to?	
Restrictions to travel/access?	
What supplies can they bring with them?	
What personal supplies should they bring with them?	
Other?	





Resource Request Instructions

Use/ Purpose

A particular resource is unavailable, and you require assistance to source and supply it.

Who

From	To
Site Approved by: Incident Commander	Emergency Operations Centre (EOC) Received by: EOC, Operations Section
Emergency Operations Centre Approved by: EOC Director	Provincial Regional Emergency Operations Centre (PREOC) Received by: PREOC, Operations Section

How

While requests can be sent verbally, when possible, it is preferable to send, or follow-up with a completed resource request form.

Instructions

When requesting a resource, it is important to provide the context of what you are trying to accomplish, which can be supplemented by a specific make, model, size etc.

If the person receiving your request does not know what you are trying to do, if the specific resource is not available, they understand the context and can search for other appropriate items.

For example:

DO: ask for earth moving equipment to dig a trench to replace a culvert. If known, indicate the reach that the machine must have, a preferred size, model of machine if you know it, and whether it requires an operator

DON'T: only ask for the size or model of a machine.

Note: the "Request number" at the top right of the template is an internal tracking number and should be numbered sequentially.



Resource Request

Date of Request:	2020/01/20	Time of Request:	15:50	Request No.	1
Priority:	<input checked="" type="checkbox"/> High (Emergency)	<input type="checkbox"/> Medium (Priority)	<input type="checkbox"/> Low (Routine)	Task No.	123456
Requested by:	Name	Dept/Agency/Function	Contact Number		
		EOc/Metchosin	555.765.4321		

What is being Requested?

Resource Type/Kind:	Evacuation notification personnel		Quantity:	20 people
Units of Measure:	people	When Required:	ASAP until 22:00	
Mission (Purpose for Resource)	First shift of personnel to perform door-to-door evacuation notifications			

Resource must come with:

<input type="checkbox"/> Fuel	<input type="checkbox"/> Meals	<input type="checkbox"/> Operator(s)	<input type="checkbox"/> Water	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Lodging	<input type="checkbox"/> Power
-------------------------------	--------------------------------	--------------------------------------	--------------------------------	--------------------------------------	----------------------------------	--------------------------------

Other: Must have appropriate clothing to work outdoors. Must have minimum of ISC 100 training.

Special Instructions (e.g. Safety message, ingress/egress routes...)

Forward Request To: (Organization/Agency/Vendor who ultimately obtains resource – use required fields only)

Contact Name/Position:		Organization/ Agency/Vendor:	VIR PREOC	
Contact No.:	555.123.9876	Estimated Cost:		
Actions Taken:				

Delivery/Assigned Location (use required fields only)

Location/ Site Name:	Incident Command Post	Street Address:	4450 Happy Valley Rd		
City, Province:	Metchosin , BC	Report To:	Joe SMith	Contact Number:	555.123.4567
Intersection Street 1:		Intersection Street 2:			
Completed by:	Name	Function/Title	Date & Time	Entered	
	Steph Murphy	Logistics Chief	2020/01/20 @15:58	<input type="checkbox"/>	

Financial Approval

Spending Authority:	Name	Function/Title	Signature
	William Jones	EOC Director	

Distribution: Operations Planning Logistics Finance Other: _____

SAMPLE



Resource Request

Date of Request:		Time of Request:		Request No.	
Priority:	<input type="checkbox"/> High (Emergency)	<input type="checkbox"/> Medium (Priority)	<input type="checkbox"/> Low (Routine)	Task No.	
Requested by:	Name	Dept/Agency/Function EOC/Metchosin	Contact Number		

What is being Requested?

Resource Type/Kind:		Quantity:	
Units of Measure:		When Required:	
Mission (Purpose for Resource)			

Resource must come with:

<input type="checkbox"/> Fuel	<input type="checkbox"/> Meals	<input type="checkbox"/> Operator(s)	<input type="checkbox"/> Water	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Lodging	<input type="checkbox"/> Power
-------------------------------	--------------------------------	--------------------------------------	--------------------------------	--------------------------------------	----------------------------------	--------------------------------

Other: _____

Special Instructions (e.g. Safety message, ingress/egress routes...)

Forward Request To: (Organization/Agency/Vendor who ultimately obtains resource – use required fields only)

Contact Name/Position:		Organization/ Agency/Vendor:	
Contact No.:		Estimated Cost:	
Actions Taken:			

Delivery/Assigned Location (use required fields only)

Location/ Site Name:		Street Address:	
City, Province:		Report To:	Contact Number:
Intersection Street 1:		Intersection Street 2:	
Completed by:	Name	Function/Title	Date & Time
			Entered <input type="checkbox"/>

Financial Approval

Spending Authority:	Name	Function/Title	Signature
Distribution:	<input type="checkbox"/> Operations	<input type="checkbox"/> Planning	<input type="checkbox"/> Logistics
	<input type="checkbox"/> Finance	Other: _____	



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PLANNING PHASE CHECKLIST

Outcomes:

Determine the scope of the evacuation, attain authorization and mobilize personnel to assist.

Planning Inputs

DT.1. Evacuation Briefing Summary

Part 2

- Evacuation Situation Map
- External Evacuation Map
- Evacuation Action Plan

Part 3

- Evacuation Resource Map: Receiving Points
- Evacuation Resource Map: Egress Routes
- Evacuation Resource Map: Traffic Control Points
- Stakeholders and Partners
- Site Personnel Team Composition
- Door-2-Door Notification Personnel
- Traffic Control Personnel
- Transportation Collection Point Personnel
- Notification Triggers
- Public Notification Methods
- Evacuation *Public Messaging*

Part 4

- Evacuation *Sectors & Assignments (separate file)*

Part 5

- None

ACTION

- 1. Scope Evacuation**
 - Create Internal Evacuation Map
 - Create External Evacuation Map
- 2. Develop Evac. Action Plan**
- 3. Activate additional personnel if required**
- 4. Develop Public Messaging**
 - Follow EOC Public Messaging procedures



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Internal Evacuation Situation Map Instructions

Use/ Purpose

Used internally to visually represents locations of the hazards & resources to assist with an evacuation.

Who


- In an EOC the GIS Branch of the Planning Section is responsible for mapping.

Instructions

*Ideally a digital map would be produced, however if personnel or equipment is not available, a paper map can be created using the following styles. (Blank evacuation template: Part 4: Mapping, page 9)

- 1) Add **date and time** in respective blocks.
- 2) Draw outline of respective **protective measures areas** on map, using the following colour scheme. (information can be found on Evacuation Briefing Summary)

Evacuation Order	RED	Shelter-in-Place	BLUE
Evacuation Alert	YELLOW	Tactical Evacuation	Orange

- 3) Identify appropriate **receiving point(s)** on evacuation map and mark them as a (**GREEN**) star. 
(potential receiving points listed on Evacuation Resources: *Receiving Points*, In the accompanying resources document)

The following are considerations in identifying a receiving point:

- Safe distance from hazard (including anticipated spreading)
- Proximity to evacuees
- Capacity of facility
- Access and transportation to the facility (if outside your municipality the host municipality must be contacted)

- 4) Identify prioritized **Egress Collector Routes**. Trace the routes in GREEN marker. (In an urban setting any road can be an egress route. Major collector routes are identified on Egress Collector Routes Map, Resources Page ##)

The following are considerations when identifying egress routes:

- Routes that will lead away from hazard area
- Routes that lead towards receiving points
- Points of congestion that may inhibit egress

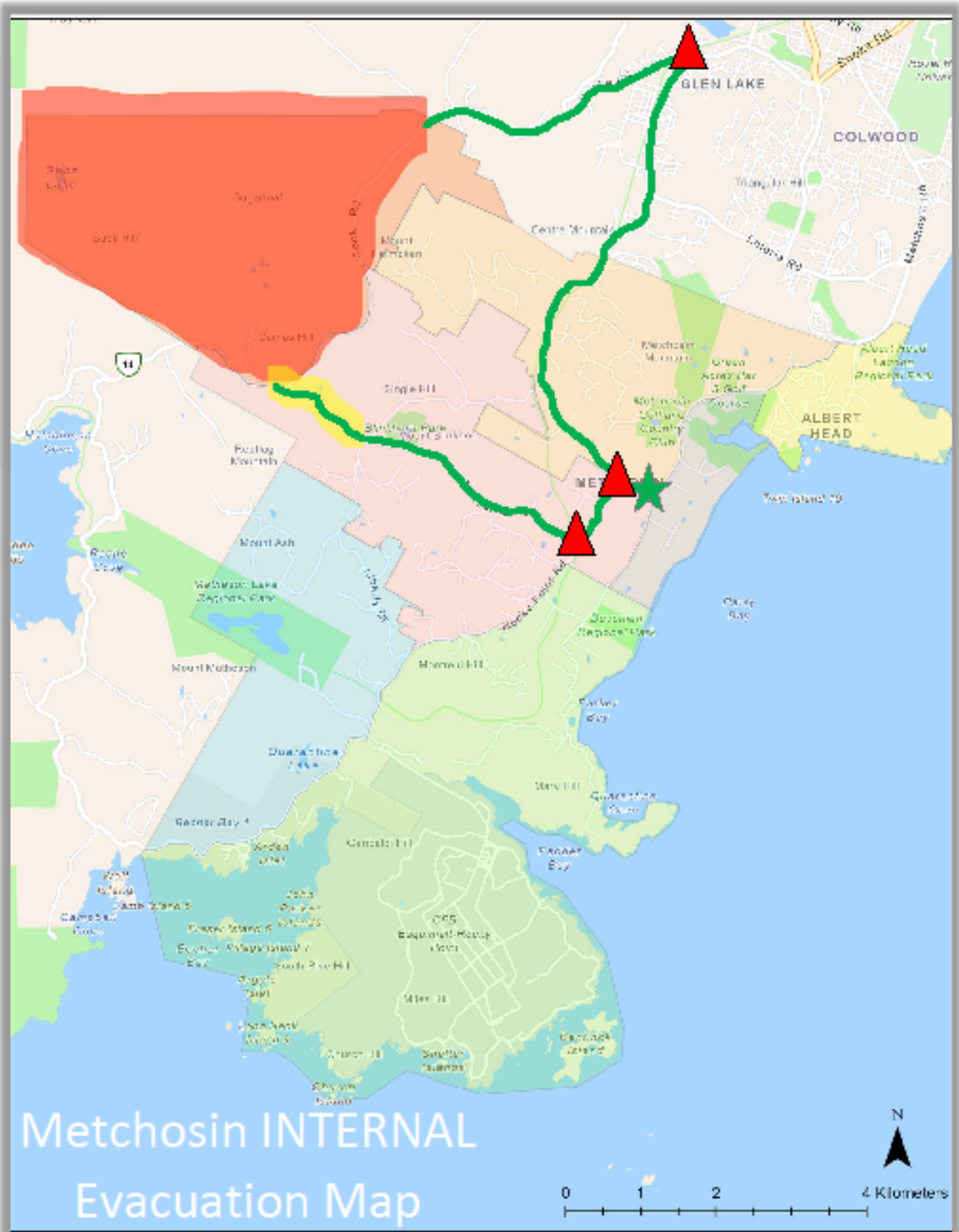
- 5) Identify any **anticipated points of congestion** to establish a traffic control point at.

The following are considerations when identifying Traffic Control Points:

- What requires human intervention and what can be done by traffic control devices (e.g. Barricades)
- Where do major routes converge
- Where are natural points of congestion (physical attributes, stop signs, etc.)

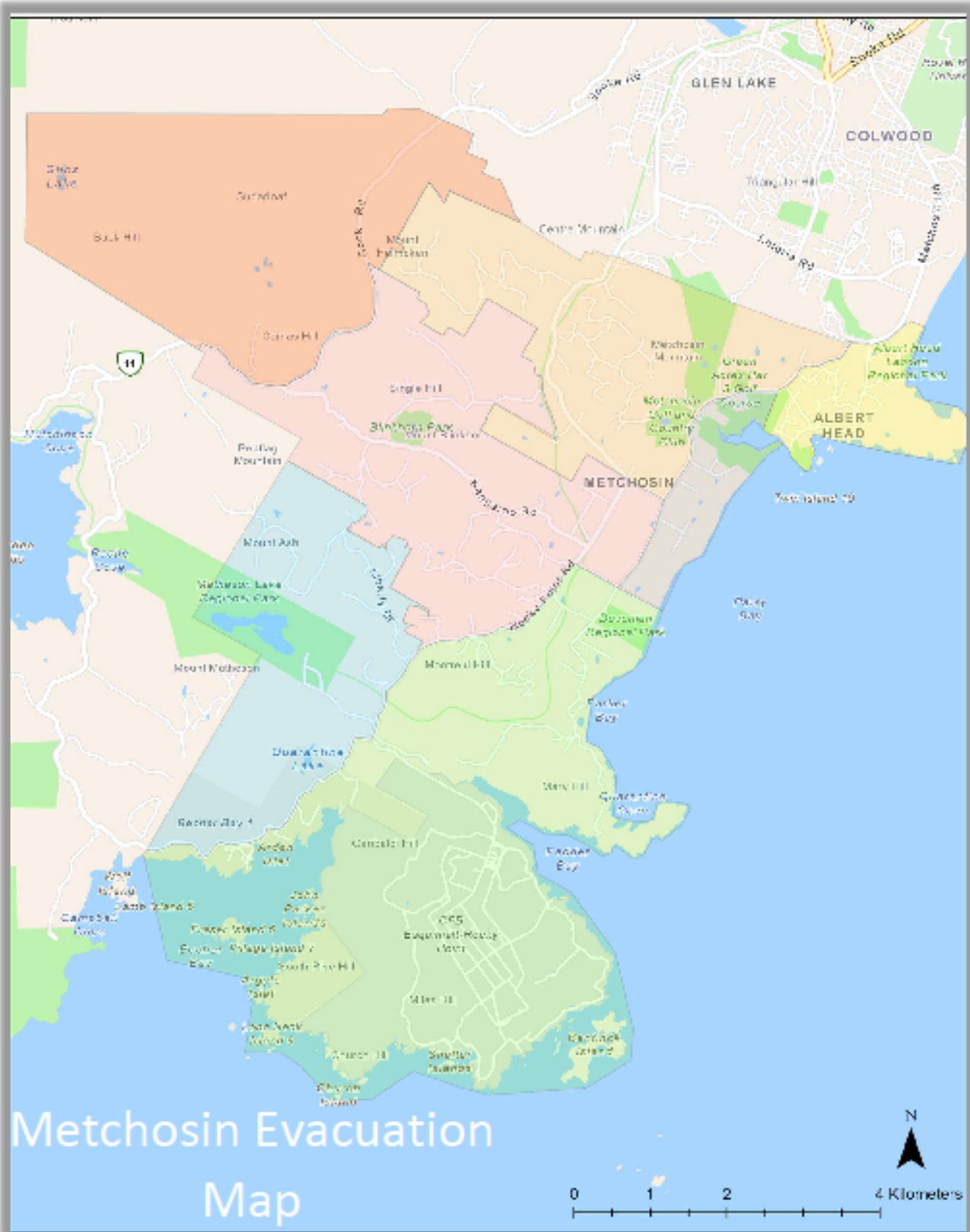
- 6) Identify **Response Sites** (information from *Evacuation Briefing Summary* or Site Commander)

- Incident Command
- Staging Area
- EOC




Metchosin INTERNAL Evacuation Map

 Evacuation ORDER Area	 Egress Route
 Evacuation ALERT Area	 Receiving Point
 Shelter-in-Place Area	 Traffic Control Point
 TACTICAL Evacuation Area	



Evacuation ORDER Area
Evacuation ALERT Area
Shelter-in-Place Area
TACTICAL Evacuation Area

Egress Route
Receiving Point 



Purposely left blank



External Evacuation Map Instructions

Use/ Purpose

A resource to disseminate publicly and with partner response organizations.

Who


- In an EOC the GIS Branch of the Planning Section is responsible for mapping.
- If an EOC has not been established yet, the anyone can use the resources provided to develop a paper map.

Instructions

Same instructions as the Evacuation Situation Map except omitting steps 5 and 6

- 1) Add **event name, date and time** in respective blocks.
- 2) Draw outline of respective **protective measures areas** on map, using the following colour scheme. (information can be found on Evacuation Briefing Summary)

Evacuation Order	RED
Evacuation Alert	YELLOW
Shelter-in-Place	BLUE
Tactical Evacuation	BLACK

- 3) Identify potential **receiving point(s)** on evacuation map and mark them as a **(GREEN)** star. 
(potential receiving points listed on *Receiving Point Map*, resources page ##)

The following are considerations in identifying a receiving point:

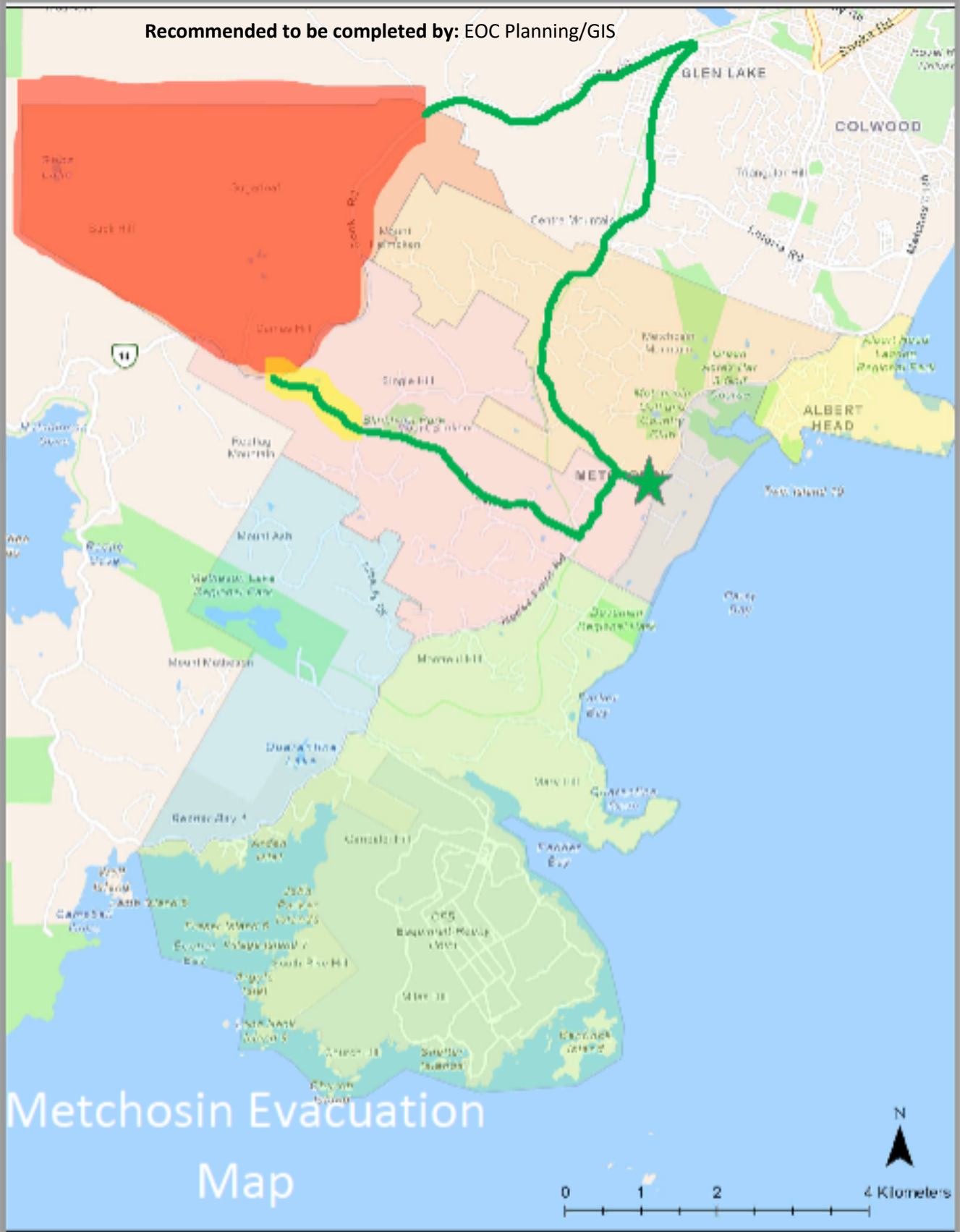
- Safe distance from hazard (including anticipated spreading)
- Proximity to evacuees

- 4) Identify prioritized **Egress Collector Routes**. Trace the routes in GREEN marker. (In an urban setting any road can be an egress route. Major collector routes are identified on Egress Collector Routes Map, Resources Page ##)

The following are considerations when identifying egress routes:

- Routes that will lead away from hazard area
- Routes that lead towards receiving points
- Points of congestion that may inhibit egress


Recommended to be completed by: EOC Planning/GIS



Metchosin Evacuation Map

Evacuation ORDER Area
Evacuation ALERT Area
Shelter-in-Place Area
TACTICAL Evacuation Area

Egress Route

Receiving Point 



Metchosin Evacuation Map

Evacuation ORDER Area
Evacuation ALERT Area
Shelter-in-Place Area
TACTICAL Evacuation Area

Egress Route

Receiving Point



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Evacuation Action Plan Instructions

Use/ Purpose

This is a summary of the Actions being taken and the resources being used

Who

In an EOC the Evacuation Action Plan is the responsibility of the Planning Section.

Instructions

Part 1: Evacuees

Lead: Municipal Emergency Program
(develop once assignments built)

Part 2: Receiving Points

Lead: Municipal ESS Program

- 1) Review the potential receiving points identified on the Evacuation Map. Determine an ideal combination of:
 - **Safe:** least risk of being exposed to the hazard or being evacuated during the emergency
 - **Close:** relatively easy for evacuees to get to. Consider access, feeder routes, parking and transit options
 - **Services:** What is available within the facility (bathrooms, showers, commercial kitchen)
 - **Capacity:** Is there enough space for all the evacuees? Will more than one receiving point be necessary?
 - **Amenities:** What services are located near the facility (restaurants, hotels, laundromat)
- 2) Prioritize which Receiving Point(s) to activate. Ideally one facility would be used, ESS personnel capacity would be stretched to cover two facilities and regionally would be difficult to open any more than two.
- 3) Work with ESS Branch Coordinator or Local ESS Volunteers to complete the fields for each facility.



Evacuation Action Plan Instructions (cont.)

Part 3: Collector Routes

Lead: Public Works/Traffic
(wait to see what ISL provides)

Part 4: Traffic Control Points

Lead: Public Works/Traffic

*Traffic Control points can be used to prohibit travel or to expedite egress

Work with Public Works and Police to identify known congestion points. Consider:

- Time of day,
- weather,
- Converging roads,
- Traffic control in place (stop signs versus traffic lights)

Part 5: Timing

Establish Emergency Operations Cntr:

Lead: Municipal Emergency Program

- Assuming facility access, minimal road congestion and staff availability, the following are rough time estimates:

Callout and muster: 60 minutes Set-up EOC: 30 minutes **TOTAL: 1.5 hours**

Secure Evacuation Order area:

Lead: Police

- This will likely be done as a phased approach as resources become available.
- Tactics that may be employed include:
 - Trained personnel control major routes
 - Physical resources are used to block access (e.g. barricades, pylons)
 - Police, Bylaws, Public Works, Traffic Contractors
 - Public works or traffic contractors

Door-2-Door notification:

Lead: Police

Use the *Evacuation Assignment Map* to calculate the time to complete a door-2-door notification.

- 1) Identify which assignments are within the Evacuation Order Area
- 2) Option A: sum the estimated notification times for each active assignment (more accurate)
Option B: Multiple the number of assignments by 60 minutes then divide by the number of notification teams. (less accurate)

****Note:** Notification times are based on the following estimates

Multifamily building: 2 minutes per suite

Single Family dwelling: 4 minutes per house

Single Family, large parcel (> 2 acres) 6 minutes per house

Egress Time

An Egress Time Analyser tool (Microsoft Excel file) can be used to approximate egress times given evacuation parameters. The tool can be found at: insert file location

Establish Receiving Point:

Lead: Municipal ESS team

Estimates: Callout and muster: 60 minutes

Setup: 30-60 minutes



Evacuation Action Plan

Reference completed Evacuation Map template

Date	01/20/20
Time	16:20

Part 1: Evacuees

# of notification assignments in Evacuation Order	8	
	Number	% of total (optional)
# of properties being evacuated	58	
Estimated population	120	
Are their additional needs anticipated?: Communication Medical Independence Supervision Transportation	None	

Part 2: Receiving Points

Receiving Point #1	
Facility name	Metchosin Elementary
Address	4495 Happy Valley Rd.
Capacity	
Services offered	Registration, Referral, Information
Expected opening	17:00
Expected operating hours	17:00 01/20/20 – 19:00 01/21/20
Contact on-site (name)	Jessica Martin
Contact Details	555.678.9123
Receiving Point #2	
Facility name	N/A
Address	
Capacity	
Services offered	
Expected opening	
Expected operating hours	
Contact on-site (name)	
Contact Details	

SAMPLE



Evacuation Action Plan

Part 3: Collector Routes

Route Name	Road Name	Alt Road Name	Capacity
Sooke Rd	Sooke Rd	Hwy 14	
Happy Valley North East	Happy Valley Rd	N/A	

Part 4: Traffic Control Points

ID	Address	Resources Assigned	Start/End times (24-hour Clock)
U	Sooke Rd and Kangaroo Rd	Police member + Car	
Y	Happy Valley Rd and Glen Forest Way	Barricades	

Part 5: Timing (*Is there enough time?)

Estimated Times	Estimated. Time Req'd	Actual Start time	Actual End time
Establish Emergency Operations Cntr	1 hour	16:00	
Secure Evacuation Order Area	1 hour	16:00	
Door-to-Door Notification	4 hours	16:20	
Establish Receiving Point	1.5 hours	16:00	
Clear area of residents ("ETA"excel tool)			

Part 6: Personnel

Personnel	# Required	# Available	Gap or Surplus
Notification			
Security	0	0	0
Traffic Control	2	2	0
Emergency Support Services	15	10	5
Emergency Operations Centre	5	5	0

SAMPLE



Evacuation Action Plan

Reference completed Evacuation Map template

Date	
Time	

Part 1: Evacuees

# of notification assignments in Evacuation Order		
	Number	% of total (optional)
# of properties being evacuated		
Estimated population		
Are their additional needs anticipated:? Communication Medical Independence Supervision Transportation		

Part 2: Receiving Points

Receiving Point #1	
Facility name	
Address	
Capacity	
Services offered	
Expected opening	
Expected operating hours	
Contact on-site (name)	
Contact Details	
Receiving Point #2	
Facility name	
Address	
Capacity	
Services offered	
Expected opening	
Expected operating hours	
Contact on-site (name)	
Contact Details	



Evacuation Action Plan

Part 3: Collector Routes

Route Name	Road Name	Alt Road Name	Capacity

Part 4: Traffic Control Points

ID	Address	Resources Assigned	Start/End times (24-hour Clock)

Part 5: Timing

Estimated Times	Estimated Time Req'd	Actual Start time	Actual End time
Establish Emergency Operations Cntr			
Secure Evacuation Order Area			
Door-to-Door Notification			
Establish Receiving Point			
Clear area of residents ("ETA" excel tool)			

Part 6: Personnel

Personnel	# Required	# Available	Gap or Surplus
Notification			
Security			
Emergency Support Services			
Emergency Operations Centre			



EXECUTION PHASE CHECKLIST

Outcomes:

Develop assignment specific information and resource packages for support teams.

Part 1

- EOC Evacuation Structure
- Site Evacuation Structure

Part 2

- Site Assignment Briefing Template
- Evacuee Information Pamphlet
- Transportation Request
- Transportation Request Tracking
- Transportation Resource Tracking
- Evacuation Rescind Template

Part 4

- Sector Index
- Assignment Area Index(s)
- Assignment Area Layout(s)

Part 3

- Emergency Transportation Guideline
- Extraordinary Evacuee Authorization
- Multi-family Building Notification Guideline
- Partner Notification Guideline
- Reluctant Evacuee Guideline
- Temporary Access to Evacuation Area
- Evacuated Unaccompanied Minors Guideline
- Protective Measures Matrix

Part 5

- Field Reference Guide
- Assignment Briefing
- Door-2-Door Notification Team Planning
- Evacuation Notification Recording Procedures
- Notification Log

ACTION	
<input type="checkbox"/>	1. Complete Site Teams Briefings (Notification, Traffic, ESS)
<input type="checkbox"/>	2. Complete Evacuee Information Pamphlet
<input type="checkbox"/>	3. Compile site team packages
<input type="checkbox"/>	4. Transportation Coordination
<input type="checkbox"/>	5. Provide ongoing support and advice
<input type="checkbox"/>	6. Rescind Evacuation



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Site Assignment Briefing Instructions

- A separate Site Assignment Briefing should be completed for each type of team.
- Where multiple teams exist (e.g. multiple notification teams) care should be taken to ensure that assignment specific information is provided. This may be done at the EOC or by the team supervisor.
- In consultation with the EOC and the Site Commander, determine whether re-entry permits will be issued at this point?



Recommended to be completed by:
Incident Commander OR EOC Operations

Site Assignment Briefing

Incident Name	Wildfire 2020	Date (yyyy/mm/dd)	2020/01/20
Authority (Tactical, Evac Order)	Evac Order	Time (24 hr clock)	15:45

Supervisor	Name Joe Smith	Position Duty Fire Chief
Supervisor's Contact	555.4546.1239	

Task	<input checked="" type="checkbox"/> Notification <input type="checkbox"/> Traffic <input type="checkbox"/> ESS <input type="checkbox"/> Security <input type="checkbox"/> Transportation	Description: Provide door-to-door notification of the evacuation order. Direct evacuees to Henderson Recreation Centre.
Assignment Location (starting point, assignment area, etc.)	Muster at Staging area:	
Situation Summary (what is going on?)	A Wildfire is spreading towards the area. There is a risk to people and structures.	
Are Re-entry Permits allowed at this point? (Y/N)	N	
Re-entry Permit Details (From EOC)	N/A	
Receiving Point (where evacuees should go)	Facility Name Metchoshin Elementary School	Address 4495 Happy Valley Rd.
Routes to take or avoid	Take Cadboro Bay Road South McKenzie Ave West Beach Drive South	Avoid
Where to get information	Website www.metchoshin.bc	
	Phone 555.123.4567	
Contact for Assistance	Phone	

SAMPLE



Site Assignment Briefing

Incident Name		Date (yyyy/mm/dd)	
Authority (Tactical, Evac Order)		Time (24 hr clock)	

Supervisor	Name	Position
Supervisor's Contact		

Task	<input type="checkbox"/> Notification <input type="checkbox"/> Traffic <input type="checkbox"/> ESS <input type="checkbox"/> Security <input type="checkbox"/> Transportation	Description:
Assignment Location (starting point, assignment area, etc.)		
Situation Summary (what is going on?)		
Are Re-entry Permits allowed at this point? (Y/N)		
Re-entry Permit Details (From EOC)		
Receiving Point (where evacuees should go)	Facility Name	Address
Routes to take or avoid	Take	Avoid
Where to get information	Website	
	Phone	
Contact for Assistance	Phone	



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Evacuee Information Pamphlet Instructions

Template Format

The following *Evacuee Information Pamphlet* template only requires a few situationally dependant pieces of information to be ready for distribution.

Each required piece of information should be entered into a text field that is labeled “click or tap here to enter text”

Situationally dependant fields:

(Time to leave)

Due to Risks from: (enter the risks to the public that has caused the evacuation)

Evacuation Area: Enter a geographic description of the evacuation area. Ideally include street names.

(where should I go)

Facility name: (enter the name o f the receiving point that evacuees should go to)

Address: enter the receiving points facility address

Hours of Operation: Enter when the receiving point is expected to be active and open.

(where can I get more information)

Confirm: website, twitter and Facebook information

Event Hashtag: (enter the hashtag being used y EOC communications for this event)

If you require assistance with transportation or special needs: (enter a phone number that people can call for assistance)



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Evacuation

Time to Leave

Due to risks from: **Wildfire**

Evacuation Area: **North West Metchosin, North of Sooke Rd.**

District of Metchosin has issued an Evacuation Order,
You are required to leave immediately.

Where should I go?

The following facility is being used to as a reception centre to receive evacuees. It may provide the following:

- Registration and referral services
- Additional information

Facility Name: **Metchosin Elementary School**
Address: **4495 Happy Valley Rd**
Hours of Operation: **17:00-23:30**

Where can I get more Information?

Website	www.metchosin.ca
Twitter	@
Event Hashtag	#MetchosinWildfire
Facebook	(name)

If you require assistance with
transportation or special needs: **555.123.4567**



Things to take with you:

People	Take your “grab-and-go” emergency kit for each member of your family and proceed to your meeting place or the municipal reception centre.
Pets	Have a carrier and food for each pet.
Paperwork	Have paper or electronic copies of important documents. (identification, credit cards, insurance, etc.)
Prescriptions	Take your essential medications and copies of prescriptions.

Connect

Do:

Contact Family and Friends to let them know you are safe.
Use your out-of-area contact, social media or text messages

Avoid:

Using telephone lines to call



Evacuation Time to Leave

Due to risks from: Click or tap here to enter text.

Evacuation Area: Click or tap here to enter text.

District of Metchosin has issued an Evacuation Order,
You are required to leave immediately.

Where should I go?

The following facility is being used to as a reception centre to receive evacuees. It may provide the following:

- Registration and referral services
- Additional information

Facility Name: Click or tap here to enter text.

Address: Click or tap here to enter text.

Hours of Operation: Click or tap here to enter text.

Where can I get more Information?

Website	www.Metchosin.ca
Twitter	@
Event Hashtag	# Click or tap here to enter text.
Facebook	(name)

If you require assistance with transportation or special needs: Click or tap here to enter text.



Things to take with you:

People	Take your “grab-and-go” emergency kit for each member of your family and proceed to your meeting place or the municipal reception centre.
Pets	Have a carrier and food for each pet.
Paperwork	Have paper or electronic copies of important documents. (identification, credit cards, insurance, etc.)
Prescriptions	Take your essential medications and copies of prescriptions.

Connect

Do:

Contact Family and Friends to let them know you are safe.
Use your out-of-area contact, social media or text messages

Avoid:

Using telephone lines to call



Evacuation Team Packages

Team packages are compiled manually with the following components:

Notification Team(s) Packages

Briefing	Pg 85
Evac Situation Map	Pg. 68
Quick Reference Guide	
Evacuee Information Pamphlet	Pg.91-92
Assignment Map	Evacuation Mapping Package
Notification Log	

Traffic Control Team(s) Packages

Briefing	Pg 85
Evac Situation Map	Pg. 68
Quick Reference Guide	
Evacuee Information Pamphlet	Pg.91-92

ESS Team Package

Briefing	Pg 85
Evac Situation Map	Pg. 68
Quick Reference Guide	
Evacuee Information Pamphlet	Pg.91-92



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Transportation Coordination

Responsibility

Both Metchosin and BC Transit have responsibilities for emergency transportation.

Roles

In the EOC, Logistics is the lead for transportation. The Operations Section will provide support as needed.

When possible, BC Transit will send a liaison to the EOC to assist. If multiple EOCs are open, the BC Transit Liaison may respond to the PREOC instead.

Resources:

Transportation Guideline	Part 3: Resources Page 36
Transportation Request	Page 96 (Below)
Transportation Request Tracking	Page 99 (Below)
Transportation Resource Tracking	Page 103 (Below)



Transportation Request

Date:	2020 01 20
Time:	18:45
Request # (completed by EOC)	1

Section 1

Sent From:	Notification Team #2
Received By:	EOC Operations

Where is it needed:	Address:	Sector:	
Evacuee Name:	Jane Lee	Evacuee Contact info	555.567.8912
Why is it needed:	<input type="checkbox"/> No Personal Transport <input checked="" type="checkbox"/> Mobility Issues <input type="checkbox"/> Medical Issues <input type="checkbox"/> Other: _____	Describe: Require Electric Wheelchair access.	
Special Transportation Requirements: (Wheelchair access, stretcher, etc.) Need a ramp to load electric wheelchair			

Section 2

Resources Assigned	<input checked="" type="checkbox"/>	Description:	Handy Dart
Scheduled pickup Location	<input checked="" type="checkbox"/>	Address:	
Estimated Pickup time	<input checked="" type="checkbox"/>	Time:	

Status	<input checked="" type="checkbox"/>	Awaiting Assignment
	<input checked="" type="checkbox"/>	Assigned
	<input type="checkbox"/>	Picked up
	<input type="checkbox"/>	Complete
	<input type="checkbox"/>	Cancelled

Notes:

SAMPLE



Transportation Request

Date:	
Time:	
Request # (completed by EOC)	

Section 1

Sent From:	
Received By:	

Where is it needed:	Address:		Sector:	
Evacuee Name:		Evacuee Contact info		
Why is it needed:	<input type="checkbox"/> No Personal Transport <input type="checkbox"/> Mobility Issues <input type="checkbox"/> Medical Issues <input type="checkbox"/> Other: _____	Describe:		
Special Transportation Requirements: (Wheelchair access, stretcher, etc.)				

Section 2

Resources Assigned	<input type="checkbox"/>	Description:	_____
Scheduled pickup Location	<input type="checkbox"/>	Address:	_____
Estimated Pickup time	<input type="checkbox"/>	Time:	_____

Status	<input type="checkbox"/> Awaiting Assignment
	<input type="checkbox"/> Assigned
	<input type="checkbox"/> Picked up
	<input type="checkbox"/> Complete
	<input type="checkbox"/> Cancelled

Notes:	
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Recommended to be completed by: EOC Logistics

Transportation Request Tracking

Request #	Sector	# of ppl	Additional Requirements (stretcher, easy access, etc.)	Resource Assigned	Status (Requested, Assigned, In-progress, Complete)	Notes
1	NE	1	Electric Wheelchair	Handy Dart	Complete	scheduled pickup at 18:45
2	NE	2	none	BC Transit Bus	Assigned	
3	CE	3	One Evacuee travels with oxygen bottle		Requested	
4	SE	6	Also one large dog		Requested	



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Transportation Asset Tracking

Date: 2020 01 20

Description	Provider	Unit #	Capacity	Available start/end)	Notes	Assignment 1		Assignment 2		Assignment 3	
						Start time	End time	Start time	End time	Start time	End time
Handy Dart	BC transit	34		18:00/01:00		18:00					
Double Decker Bus	BC Transit	145		20:00/							
Double Decker Bus	BC Transit	145		20:00/							
Standard Bus	BC Transit	269		20:30							
Standard Bus	BC Transit	247		20:30							
Passenger Van	Wilson's		15	19:00							



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Transportation Asset Tracking

Date:

Description	Provider	Unit #	Capacity	Available start/end)	Notes	Assignment 1		Assignment 2		Assignment 3	
						Start time	End time	Start time	End time	Start time	End time





Evacuation Rescind (All Clear) Instructions

Use/ Purpose

An Evacuation Rescind is the official notice that an area under Evacuation Alert or Evacuation Order is now safe to re-occupy

When

An Evacuation Alert or Order should be rescinded:

- upon recommendation or consultation with the Incident Commander or Subject Matter Expert, and
- in the case of a large scale evacuation, when the community is able to supply health services, fuel, water and food to returning evacuees for a minimum of 7 days.

Who

The template is completed by the Operations Section of the EOC.

The following positions can authorize an Evacuation Rescind:

- Mayor
- Municipal Council
- EOC Director
- CAO

Instructions

Approval to Rescind

1. Incident Commander/ Subject Matter Expert
2. EOC Director
3. Mayor/Council

Rescind

4. Complete template
5. Send draft to EMBC (if time permits)
6. Get Signature
7. Notify Public
8. Send copy to EMBC



EVACUATION RESCIND

North West Metchosin

[DATE [2020/01/20](#) TIME [10:30](#)]

The Evacuation Order, pursuant to [\[Section 12 \(1\) of the BC Emergency Program Act\]](#) issued at [01/20/20, 15:45](#) to the area(s) North West District of Metchosin has been rescinded.

[No Evacuation Alert remains in place at this time](#)

An Evacuation Order may need to be reissued; however, if that is deemed necessary, the Evacuation Order process will re-commence.

WHAT YOU SHOULD DO:

- Fill the gas tank of personal vehicles
- Bring a minimum of three days of food and essential supplies (e.g. medications, pet supplies) with you as local grocery stores may not yet have adequate stock
- If your animals or livestock have been relocated, call [\[contact number\]](#) to coordinate their safe return

For more information contact: District of Metchosin [Emergency Program at 555.123.4567](#)

[\(signature\)](#)

Mayor, District of Metchosin



EVACUATION RESCIND

DATE _____ AND TIME _____

The Evacuation Order, pursuant to [Section 12 (1) of the BC *Emergency Program Act* issued at _____ to the area(s) _____ has been rescinded.

An Evacuation Alert is _____ still in place.

An Evacuation Order may need to be reissued; however, if that is deemed necessary, the Evacuation Order process will re-commence.

WHAT YOU SHOULD DO:

- Fill the gas tank of personal vehicles
- Bring a minimum of three days of food and essential supplies (e.g. medications, pet supplies) with you as local stores and services may not yet have adequate stock to meet your needs.
- If your animals or livestock have been relocated, call _____ to coordinate their safe return

For more information contact: _____

District of Metchosin



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