

**MCC**  
**EMERGENCY PROCEDURES PLAN**

**ANNEX C - STORM SHELTER USE REPORT/POST-EVENT CHECKLIST**

Incident date:

Incident time:

Incident location:

Time tornado warning was issued:

Approximate time storm shelter doors were closed:

Approximate number of persons in storm shelter when doors were closed:

Approximate time spent in storm shelter:

Storm shelter supplies used:

Item

Quantity

Replaced

Date / By whom?

**General evaluation of safety, efficiency and speed:**

**Recommendations for improvement:**

## MCC EMERGENCY PROCEDURES PLAN

**General Comments:**

### Post-Event Checklist/Inspection

		INSPECTED/REPLACED	DATE	INITIALS
<input type="checkbox"/>	Weather receiver			
<input type="checkbox"/>	Radio (AM/FM)			
<input type="checkbox"/>	Flashlights			
<input type="checkbox"/>	First Aid kits 1/250 occupants			
<input type="checkbox"/>	Thermal rescue blanket			
<input type="checkbox"/>	Automated external defibrillator (AED)			
<input type="checkbox"/>	Fire extinguishers			
<input type="checkbox"/>	Hand sanitizer			
<input type="checkbox"/>	Water			
<b>Other Miscellaneous Items</b>				
<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>				

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MCC Police Officer (Signature) Date

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MCC Police Officer (Print Name)