PNAP Evacuation Programs

Form- (PNAP) Person requiring special assistance in case of evacuation

The Régie incendie Memphrémagog Est, has set up a new program for people who need special assistance to evacuate in case of a fire. This program is intended for people with a particular disability (intellectual, hearing impaired, blind, handicapped and elderly people with motor or other problems) who reside in the municipalities served by the Régie incendie Memphrémagog Est, i.e.: Sainte-Catherine-de-Hatley, Ayer's Cliff, Stanstead, the Township of Hatley, the Township of Stanstead, Ogden, Hatley, West Barnston, East Stanstead and North Hatley.

These persons are invited to fill out a form, on a voluntary basis, to inform the Fire Department of their situation. In the event of a call for a fire, the dispatcher will inform the firefighters of the presence of a person requiring special assistance and his probable location in the house; the goal being to optimize the interventions and to evacuate these persons quickly.

This free service is mainly intended for handicapped persons or persons with a permanent disability who abilities are sufficiently reduced to limit their ability to react in an emergency situation. The information contained in the registry is strictly confidential. It may not be used for any purpose other than to ensure the safety of persons in the event of a disaster. To register, simply fill out the form provided for this purpose and return it by mail or e-mail to:

Régie Incendie Memphrémagog Est Division prévention 2100 rte 143, Hatley, Québec J0B-4B0 prevention@regieincendieest.com 819-838-5877





PNAP Programs

PERSON REQUIRING SPECIAL ASSISTANCE IN CASE OF EVACUATION

Identification					
Name :			First name :		
Adress:				_ A	pp.:
Town:			Phone:		
Disabilities					
					notes
➤ Intellectual					
➤ Hearing impaired					
➤ Blind					
➤ Disabled person					
➤ Autre					
Location of the bedroom of the person who need assistance :					
	Deta	ails:			
➤ Basement					_
➤ 1st floor					_
≥ 2 nd floor					_
➤ 3rd floor					-
Autorization					
I authorize the Régie incendie Memphrémagog Est to exchange the information contained in this form with the 9-1-1 emergency call centre and I release the Régie incendie Memphrémagog Est from all responsibility in connection with this program. Signature Date					
Signature			Date		

PLEASE RETURN THIS FORM BY EMAIL OR MAIL AS INDICATED BELOW.