Emergency Management

In our continuing effort to make sure people with special needs are attended to in the event of either natural disasters or nuclear power plant emergencies, Lyme's Emergency Management Office is again incorporating the following form in this year's Town Report. Our Emergency Management Group wants to know about all people in town who might need special help in an emergency; so your cooperation and participation are greatly appreciated.

If you fall into this Special Needs category, please fill out the form and return it to:

Lyme Emergency Management
480 Hamburg Road
Lyme, CT 06371

Lyme Emergency Management

Date _____

If you need transportation or any other assistance during an emergency, please fill out this SPECIAL NEEDS form and mail it now. In an emergency, you would be assisted by local emergency workers.

I am hearing impaired ☐ Yes ☐ No

I have impaired vision ☐ Yes ☐ No

I am otherwise disabled ☐ Yes ☐ No

Please explain:

_____

I would need a ride in an evacuation

☐ Yes ☐ No

If you know of others who may need help, please list their names and addresses:

_____

_____

_____

_____

Name_____

Street_____

Apartment #_____ Town_____

Telephone #_____

Special directions to your house:

_____

_____

_____

I am a part-time resident ___Yes ___No

List months you are here:

_____

_____

_____

Even if you have previously sent in a card like this, you should send it in again whenever you receive a new booklet.

This information will remain confidential.

The Fire Company and Ambulance Association again request Lyme residents to post their house numbers in a clearly visible location so they may more effectively serve us in times of emergency.