



EMERGENCY CONTACT INFORMATION

Corresponds with Requirement 12.2

Facility address:

The nearest intersection is:

Facility owner:

Name: _____

Phone number: _____

Facility manager

Name: _____

Phone number: _____

If the facility owner and manager cannot be reached, contact the following individual I
_____ at *(insert phone number)* _____.

All client phone numbers can be found in the Client Contact List.

Emergency services:

Fire: _____

Police: _____



Ambulance: _____

Poison control: _____

Attending veterinarian: _____

Phone number: _____

Alternate veterinarian: _____

Phone number: _____