

EMERGENCY CONTACTS

EMERGENCY SERVICES:

Fire Department: 911 or _____

Police/Sheriff: 911 or _____

Ambulance: 911 or _____

E-911 Communications: 911 or _____

Prior to an occurrence, contact local E-911 to make sure they have adequate contact information in case they need to contact agency personnel in the event of an emergency. Also make sure they have diagrams, etc of your office on file.

Security System Contacts:

System Name: _____

Telephone Numbers: _____

Security System Password/Passcode: _____

AGENCY PROPERTY INFORMATION:

Building Landlord:

Contact Person(s): _____

Phone Number(s): _____

Property Insurance Carrier:

Company: _____

Policy No.: _____

Phone Number: _____

Fax Number: _____

Claims Number: _____

Claims Fax Number : _____

(It is recommended that Agency personnel print their e-mail address book for all companies the agency represents and insert those pages behind this one)



Independent Insurance
Agents of **Kentucky**

AGENCY UTILITIES INFORMATION

Electric Utility:

Emergency Contact Number: _____

Business Office Phone Number: _____

Account Number(s): _____

Key Contact Person(s): _____

Gas Utility:

Emergency Contact Number: _____

Business Office Phone Number: _____

Account Number(s): _____

Key Contact Person(s): _____

Water Utility:

Emergency Contact Number: _____

Business Office Phone Number: _____

Account Number(s): _____

Key Contact Person(s): _____

Other:

Emergency Contact Number: _____

Business Office Phone Number: _____

Account Number(s): _____

Key Contact Person(s): _____



AGENCY COMMUNICATIONS INFORMATION:

Local Telephone Service:

Emergency Repair Phone Number: _____

Business Office Phone Number: _____

Account Number: _____

Key Contact Person(s): _____

Long Distance Telephone Service:

Emergency Repair Phone Number: _____

Business Office Phone Number: _____

Account Number: _____

Key Contact Person(s): _____

Cellular Service:

Emergency Repair Phone Number: _____

Business Office Phone Number: _____

Account Number: _____

Key Contact Person(s): _____

Internet Service Provider:

Emergency Repair Phone Number: _____

Business Office Phone Number: _____

Account Number: _____

Key Contact Person(s): _____

Other:

Emergency Repair Phone Number: _____

Business Office Phone Number: _____

Account Number: _____

Key Contact Person(s): _____



AGENCY PERSONNEL INFORMATION

Employee Name	Address	Home Phone	Cell Phone	Spouse Name	Spouse Work #	Spouse Cell #



CUSTOMERS/VENDORS

Print a copy of all of the data in the Contact section of your Microsoft Outlook or similar program and attach it here. Do the same for all agency employees.

You can print the contact list for Microsoft Outlook by selecting the "Contact" folder and the select "File -> Print".

Have copies of all of these documents off-site.



Independent Insurance
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COMPUTER/AGENCY MANAGEMENT SYSTEM

Hardware Vendor:

Vendor: _____
Emergency Repair Phone Number: _____
Business Office Phone Number: _____
Account Number: _____
Key Contact Person(s): _____

Agency Management System:

System & Version: _____
Account Number: _____
Website: _____
Sales Office Phone Number: _____
Sales Rep's Phone Number: _____
Customer Support Phone Number: _____
Customer Support Email: _____
Disaster Recover Phone Number: _____
Disaster Recover Email: _____

Other agents that use the same system and their contact information



DISASTER RECOVERY

Disaster Recovery Contractors:

Name: _____
Emergency Repair Phone Number: _____
Business Office Phone Number: _____
Key Contact Person(s): _____

Name: _____
Emergency Repair Phone Number: _____
Business Office Phone Number: _____
Key Contact Person(s): _____

Electrical Contractors:

Name: _____
Phone Number(s): _____

Name: _____
Phone Number(s): _____

Plumbing Contractors:

Name: _____
Phone Number(s): _____

Name: _____
Phone Number(s): _____

Locksmiths:

Name: _____
Phone Number(s): _____

Name: _____
Phone Number(s): _____

Emergency & Restoration:

Name: _____
Phone Number(s): _____

Name: _____
Phone Number(s): _____



Carpenters:

Name: _____
Phone Number(s): _____

Name: _____
Phone Number(s): _____

Roofers:

Name: _____
Phone Number(s): _____

Name: _____
Phone Number(s): _____

Satellite Phone Vendors:

(An example is Globalstar: www.globalstarusa.com; 877-728-7466)

Name: _____
Phone Number(s): _____

Name: _____
Phone Number(s): _____

Satellite Phone Vendors:

(An example is DIRECWAY; <http://hns.getdway.com>)

Name: _____
Phone Number(s): _____

Name: _____
Phone Number(s): _____

Moving Companies:

Name: _____
Phone Number(s): _____

Name: _____
Phone Number(s): _____

