

Municipality of Wright Township, Luzerne County, Mountain Top, PA.

Wright Township Board of Supervisors, Wright Township Police Department and The Wright Township
Volunteer Firemen's Association

Information Sharing and Communication Survey Information

In an effort to facilitate communication between local leaders and business owners, managers and employees, the Wright Township Board of Supervisors, Wright Township Police Department, and Wright Township Fire Department, in a joint effort, are gathering the following information. We ask it be supplied in a timely manner to the email addresses at the bottom of page 5 (final page).

With the recent world and local events, we would like to put together a way to disseminate important and/or urgent information to the local businesses from either the local government level or from emergency services. This is not an attempt to solicit, nor will this information be publicly disseminated.

This may be utilized to send non emergent information such as general announcements, ordinance changes, or local events in the area you, your business or employees may benefit from.

Please fill out all information requested. The accuracy of this information is ESPECIALLY important.

Please Print Legibly:

Name of person filling out this information: _____

Your Phone: _____ Ext _____ Your Email: _____

Business Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Mailing Address Information (if different from street address information)

This address would be where information can be sent to be used by the business and its employees

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Main Phone Number of Business located at Street Address: _____ Ext _____

Main Phone Number of Mailing Address : _____ Ext _____

Cell numbers are preferred in this section. In an emergency it is particularly important we have a phone number that is available at most times. You may utilize your alarm call list, manager list, supervisor list or employee list to complete this section.

Name Plant Manager / Owner / No 1 In Charge : _____

Cell Phone: _____ Business Phone: _____ Ext _____

Email Address: _____

Employee Relation – Human Resources - Name: _____

Cell Phone: _____ Business Phone: _____ Ext _____

Email Address: _____

Health / Safety - Name: _____

Cell Phone: _____ Business Phone: _____ Ext _____

Email Address: _____

Name No 2 in Charge: _____

Cell Phone: _____ Business Phone: _____ Ext _____

Email Address: _____

Name No 3 in Charge: _____

Cell Phone: _____ Business Phone: _____ Ext _____

Email Address: _____

Name No 4 in Charge: _____

Cell Phone: _____ Business Phone: _____ Ext _____

Email Address: _____

Name No 5 in Charge: _____

Cell Phone: _____ Business Phone: _____ Ext _____

Email Address: _____

Approximate Number of Total Employees: _____

Fill in as many of the above people as possible – If the person is not in an area of responsibility, please note it. You can use receptionists and secretaries' positions as they may be able to get the information to employees / managers / owners as needed.

Hours of Operation: Mon _____ Tues _____ Wed _____

Thurs _____ Friday _____ Sat _____ Sun _____

Shift Hours _____

Special Shifts Operation Schedule (if applicable): _____

Does your facility have limited access - YES NO

If YES – Describe

What provisions have been made for emergency access – If a gate or access cards is needed, how would emergency services gain access (Fire, Police, Ambulance)

Are the man doors numbered – YES NO

Best door to enter Daytime: _____

Best door to enter Evening / Night: _____

Special Consideration for Entry Day/Evening/Night (Special Instructions)

Additional Comments that may be important to Township Officials, Fire, Police or Ambulance Services:

Does your facility have a community bulletin board – YES NO

Does your facility have an Employee Day / Safety Day / Special Employee Relations Day Event that you may want any of the departments to participate in ? YES NO

If Yes – Please describe the event(s):

Any Additional contact information or pertinent information any of the departments would need to know when communicating, responding, or visiting your facility on a nonemergent or emergent basis, please provide below:

The information contained in this survey may be shared with the Wright Township Secretary/Treasurer, The Wright Township Board of Supervisors and leaders of the Departments in the local government, The Wright Township Police Chief, Secretary and Police Officers, The Wright Township Volunteer Firemen's Association Fire Chief, Line Officers and Business Officers.

This information will be saved and placed into a spreadsheet for all of the business within the Township of Wright, Luzerne County, Mountain Top, PA. The information will **not** be shared with the other businesses. When sending email correspondence, all email addresses will be BCC, or an outlook list of one email address will be formed, to keep emails confidential for each facility and each person listed. This information will be kept confidential in the departments mentioned.

On a regular basis, this form will be resent to the persons listed for updates to be provided.

The current world events have placed this type of communication tool in the forefront of the minds of local officials and emergency responders. It is vital this information be accurate and kept current. We are asking if things on this list change, it be communicated to the email addresses provided below.

We are proud to have you as a member of our community. The health and safety of everyone in our community is particularly important to all of us. We appreciate everything you and everyone has done to make this township and community as great as it is. We ask you continue to be proactive and help us make this a reality.

Thank you,

Wright Township Board of Supervisors, Wright Township Police Department, Wright Township Volunteer Firemen's Association

Email to send this form to: (Please scan this form to email and send electronically)

Firechief189@wtvfd.com

If you are unable to scan and send via email – Please send via USPS or call (570-868-3765 ext 700) for pick up

Wright Township Fire Department

C/O Fire Chief – Information Form

477 South Main Road

Mountain Top PA 18707