

Appendix A: Business Continuity Plan Template



Ready Philadelphia

Ready Business. Business Continuity and Disaster Preparedness Plan

PLAN TO STAY IN BUSINESS

Business Name

Address

City, State, Zip Code

Telephone Number

If this location is not accessible we will operate from location below:

Business Name

Address

City, State, Zip Code

Telephone Number

The following person is our primary crisis manager and will serve as the company spokesperson in an emergency.

Primary Emergency Contact

Telephone Number

Alternative Number

E-mail

If the person is unable to manage the crisis, the person below will succeed in management:

Secondary Emergency Contact

Telephone Number

Alternative Number

E-mail

EMERGENCY CONTACT INFORMATION

Dial 9-1-1 in an Emergency

Non-Emergency Police/Fire

Insurance Provider

For more information, visit www.ready.gov/business or call 1-800-BE-READY

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Business Continuity and Disaster Preparedness Plan (continued)

BE INFORMED

The following natural and mad-made disaster could impact our business.

EMERGENCY PLANNING TEAM

The following people will participate in emergency planning and crisis management.

WE PLAN TO COORDINATE WITH OTHERS

The following people from neighboring businesses and our buidling management will participate in our emergency planning team.

OUR CRITICAL OPERATIONS

The following is a prioritized list of our critical operations, staff and procedures we need to recover from a disaster.

OPERATION

STAFF IN CHARGE:

ACTION PLAN:

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Business Continuity and Disaster Preparedness Plan (continued)

SUPPLIERS AND CONTRACTORS

Company Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

E-Mail: _____

Contact Name: _____ Account Number: _____

Material/Service Provided: _____

If this company experiences a disaster, we will obtain supplies/materials from the following:

Company Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

E-Mail: _____

Contact Name: _____ Account Number: _____

Material/Service Provided: _____

If this company experiences a disaster, we will obtain supplies/materials from the following:

Company Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

E-Mail: _____

Contact Name: _____ Account Number: _____

Material/Service Provided: _____

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Company Name: _____

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City: _____ State: _____ Zip Code: _____

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Business Continuity and Disaster Preparedness Plan (continued)

□ EVACUATION PLAN FOR _____ LOCATION (Insert Address)

- We have developed these plans in collaboration with neighboring businesses and building owners to avoid confusion or gridlock.
- We have located, copied and posted building and site maps.
- Exits are clearly marked.
- We will practice evacuation procedures _____ times a year.

If we must leave the workplace quickly:

1. Warning System: _____

We will test the warning system and record results _____ times a year.

2. Assembly Site: _____

3. Assembly Site Manager & Alternate: _____

a. Responsibilities include: _____

4. Shut Down Manager & Alternate: _____

a. Responsibilities include: _____

5. _____ is responsible for issuing all clear.



SHELTER IN PLACE PLAN FOR _____ LOCATION
(Insert Address)

- We have talked to co-workers about which emergency supplies, if any, the company will provide in the shelter location and which supplies individuals might consider keeping in a portable kit personalized for individual needs.
- We will practice shelter procedures _____ times a year.

If we must take shelter quickly:

1. Warning System: _____

We will test the warning system and record results _____ times a year.

2. Storm Shelter Location: _____

3. "Seal the Room" Shelter Location: _____

4. Shelter Manager & Alternate: _____

a. Responsibilities include: _____

5. Shut Down Manager & Alternate: _____

a. Responsibilities include: _____

6. _____ is responsible for issuing all clear.

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COMMUNICATIONS

We will communicate our emergency plans with co-workers in the following way:

In the event of a disaster, we will communicate with employees in the following way:

CYBER SECURITY

To protect our computer hardware, we will: _____

To protect our computer software, we will: _____

If our computers are destroyed, we will use back-up computers at the following location:

RECORDS BACK-UP

_____ is responsible for backing up our critical records including payroll and accounting systems.

Back-up records, including a copy of this plan, site maps, insurance policies, bank account records and computer back-ups, are stored onsite: _____

Another set of back-up records is stored at the following off-site location: _____

If our accounting and payroll records are destroyed, we will provide for continuity in the following ways:

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EMPLOYEE EMERGENCY CONTACT INFORMATION

The following is a list of our co-workers and their individual emergency contact information:

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ANNUAL REVIEW

We will review and update this business continuity and disaster plan in _____.