

Emergency Telephone Directory

Date: _____

Project name: _____

	Name	Day phone	Night phone
Owner:			
Project Manager			
Project Superintendent			

EMERGENCY NUMBERS

FIRE	P	CALL	9 1 1
AMBULANCE	P	CALL	9 1 1
HOSPITAL	P	CALL	9 1 1
POLICE	P	CALL	9 1 1

<u>UTILITIES</u>	Day Phone	Night Phone
Gas Company		
Electric Company		
Water Company		
Telephone Company		
Underground Service		

Nearest Hospital: _____

Special Instructions: _____

A copy should be posted on the project adjacent to the telephone or on the Job Board.

Provided by: Diversified Construction