## **Companion Animal Plan of Action Facility Requirements**

# **Introduction:**

Disaster and emergency preparedness are important planning, response, and recovery activities which the Georgia Department of Agriculture (GDA) is here to support for the companion animal industry. Animals are impacted by the same disasters and emergencies as humans. You, as a licensed animal boarding facility in Georgia, play an important role in promoting and aiding preparedness efforts, to limit the impact of disasters on both animals and people.

Because of the critical role your establishment plays in planning for emergency evacuation, it is important to have a plan in place for your staff, volunteers, and animals that not only involves your establishment but can also be understood by those in the community on both a local and state level.

### Georgia Requirements:

The State of Georgia issued a new Animal Protection Act rule, effective June 1, 2019. This rule requires every licensed facility to have a **Plan of Action**. The requirement states "all licensed facilities must develop and maintain a plan of action, accounting for the evacuation of animals in the event that said facility determines that evacuation is necessary for any reason, including, but not limited to, emergencies, natural disasters, or manmade disasters."

The Plan of Action must also include provisions for the distribution and homing of animals in the event the licensee becomes unable to tend to the needs of the animals or the license were to become revoked, surrendered, or otherwise canceled for any reason.

The Plan of Action must be kept on-site at the licensed premise and be made available for inspection by the Georgia Department of Agriculture upon request.

# Plan of Action Template:

Use the following page(s) for your facility, to outline potential contacts and needed emergency support information that may be necessary to utilize during an emergency event. The GDA encourages you to review and update the plan at least once a year, and to have an up-to-date Plan of Action on file in your facility at all times.

#### Additional Resources:

These resources may also assist you in building your plan and/or provide additional considerations that are applicable to your facility.

Ready Gov site--<u>https://www.ready.gov/business</u>
DHS Prepare Your Business For An Emergency--<u>https://www.dhs.gov/how-do-i/prepare-my-business-emergency</u>

If you have questions about building your plan, please reach out to the GDA (either directly to your inspector, or to leadership in the Animal Industry program): 404-656-4914. Learn more: <a href="http://agr.georgia.gov/companion-animal-equine-division.aspx">http://agr.georgia.gov/companion-animal-equine-division.aspx</a>.

#### PLEASE READ THE FOLLOWING 4 FILLABLE DOCUMENT INSTRUCTIONS:

- [1] The blank area where you see the <u>symbols</u> on the <u>word document</u> is the fillable area.
- [2] After the <u>word document</u> is filled in it must be saved as a <u>PDF document</u> for the <u>symbols & brackets</u> to disappear and <u>prevent</u> <u>the document from being altered</u>. The information you have entered on the <u>word document</u> will remain on the <u>PDF document</u>.
- [3] You can print out the **word document** and the **symbols & brackets** will disappear.
- [4] The <u>PDF document</u> is also fillable with the correct version of Adobe Acrobat. There are no <u>symbols & brackets</u> on the <u>PDF</u> document.

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# PLAN OF ACTION PLEASE PRINT THE FOLLOWING INFORMATION

Facility Name:														
Physical Address:		F	Phone #											
City:		ity:					Zip:							
Facility Owner:						Phone #				Cell	#			
Facility Operator:						Phone #				Cell#				
Facility CEO:						Phone #			Cell	#				
Facility Manager:					Phone #			Cell #						
Facility Director:					Cell	#								
Support Staff Perso	Support Staff Person: Supp													
Support Staff Perso	n:			Sup	port Staf	f Person	:							
Primary Veterinaria	ın:					Phone #			Cell #					
County Emergency	Management <i>i</i>	agement Agency: Phon					Cell	#	<u> </u>					
City Police Departm	nent Phone #				City	Fire Depa	artment	Phone	e #					
County Sheriff's De	partment Phor	ne#				County Fi	re Depai	rtmen	t Pho	ne#				
Facility GDA Inspec	tor:			Office	Pho	ne #			Cell #	#				
Power-Outage Plan-of-Action:														
Other-Services-Loss Plan-of-Action: Water, Gas, Etc.	i e													

What Would Prompt an Evacuation of Your Facility? Place an X In Each Applica											cabl	le B	ox:										
Tornado:		Нι	ırricane:		Winter Weather:			Flood:		Sup		ply C		Chain Concerns			C		Chemical Spill:		Π		
Power Out	age	:	Other	Other: Please List the Other Reasons Below:											ı		1	<u>.L</u>					
				ı	<u> </u>																		
							1																
How Will Animals Be Transported to The Evacuation Location? Type of Vehicle(s):																							
Is There an Animal Transport Vehicle Onsite? Yes: No:																							
If You Have an Agreement for Transportation Assistance What Is the Time Frame to Arrive at the Evacuation Location?														То									
What is Your Contingency Arrangement if																							
the Transp					_																		
The Following Information is For Each Evacuation Location You Might Use:																							
Facility Na	me:																						
Physical Ac	ddre	ess:																	Pho	ne ‡	#		
City:										Count	y:								Zi	p:			
Facility Na	me:								1														
Physical Ac	ddre	dress:												Phone #									
City:			•	County:											Zi	p:							
Facility Na	me:																						
Physical Ad	ddre	ess:													Phone #								
City:											y:								Zip:				
Facility Na	me:																				1		
Physical Ad	ddre	ess:																	Pho	ne ‡	#		
City:										Count	y:								Zi	p:			
Please Incl Can Be Eitl			-		_																(s): The Agre	eme	nt
Please Incl																							
Do You Ha	ve t	he	Resource	s ir	ı Pla	ice to	э Ме	et a M	ulti-	Day	Yes		N	o:									
(SIP) "Shel																							
What Are for "Shelte																							
Recomme			, ,																				