STORM SHELTER REGISTRATION FORM

Residential/Business

The Emergency Management Agency of Krebs urges each resident to fill out the form below completely and accurately for their safety.

The information that you provide will ONLY be used by rescue personnel if your property is involved in a natural disaster or any other event where landmarks may become undistinguishable. The Emergency Management Agency will visit your property after receiving this form to attain the GPS coordinates of your storm shelter.

If you have any questions or concerns please contact Larry Partain, Emergency Management Director, at 918.470.9001

Please return to Krebs City Hall, 5 East Washington or mail to P.O. Box 156, Krebs, Oklahoma, 74554.

Please print clearly all information requested below.

Name: _____

Phone #: _____

Physical Address: _____

Number of people in your household: _____

Circle One: Basement Safe Room Cellar

[ ] I do NOT have a storm shelter located on my property.

Special Instructions: (i.e. People w/ disabilities in your home) _____

----------OFFICIAL USE ONLY: DO NOT WRITE BELOW THIS LINE----------

GPS Shelter Coordinates: _____

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