

External Representatives

External Agency/ Contractor or Vendor	Agency or Company Name Contact Person's Name	Contact Information (Telephone/Email)
Fire Department (firefighting, rescue, hazardous materials)		
Emergency Medical Services		
Public Health		
Emergency Management Agency		
Local Emergency Planning Committee (LEPC)		
Law Enforcement (local, county or state police)		
Public Works		
Vendors		
Customers		

Instructions: Solicit representation from public agencies, contractors, vendors, and others who can provide input into the program. Include their contact information in the table above.