



## EMERGENCY ACTION PLAN ADDENDUM

DATE:

### A. Building Information

Building(s) Name(s):

Building Address(es):

Number of buildings:

Number of units per building:

### B. Landlord Information

|              |  |  |
|--------------|--|--|
| Contact Name |  |  |
| Title        |  |  |
| Company      |  |  |
| Phone        |  |  |
| Email        |  |  |

### C. Plan Addendum

#### Fire Protection Systems

Is there a fire protection system out of service? Yes No

Has FCC been notified? Yes No

Is the impairment plan in place? Yes No

1. Describe efforts to hire security guards or additional building personnel.
2. Will the fire alarm be repaired or replaced? Describe plan to repair or replace fire alarm.
3. Describe plans for the County to provide outreach and educational resources to residents regarding fire safety and prevention.
4. Describe any contract with a vendor to provide outreach and education resources to residents regarding fire safety and prevention of false alarms.
5. Describe any additional efforts to reduce the frequency of fire alarm activations.