**Appendix B: Regional Plan Template**

This Regional Emergency Management Committee Plan must be submitted to Vermont Emergency Management annually after town meeting day and before June 1st.

**Plan Adoption Date**:

**Meeting Frequency**:

**Leadership Roles**:

|  |  |
| --- | --- |
| Role | Name |
| Chair |  |
| Vice Chair |  |
| Administrative Support |  |
| Local Emergency Planning Commission Representative |  |
| Threat/Hazard Inventory and Risk Assessment & Stakeholder Preparedness Review Representative |  |
| Integrated Preparedness Plan Representative |  |

**Voting Membership Contacts**:

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| --- | --- | --- |
| City/Town | EMD or Designee Name and Contact Information | Emergency Services RepresentativeName and Contact Information |
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**Non-Voting Membership Contacts**:

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| Organization | Name and Contact Information |
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**Describe the region’s process for regional coordination during a disaster**:

**Regional Resources**:

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| --- | --- | --- |
| Resource Description | Resource POC | Additional Information |
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Act 166 Inventory

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Municipality** | **Law Enforcement Provider** | **Fire Services Provider** | **Emergency Medical Services Provider** | **Dispatch Services** | **Public Safety Mutual Aid Agreement***(yes/no – if yes, include link to plan)* | **Date Adopted** | **Members of Agreement** | **Public Safety Plan***(yes/no – if yes, include link to plan)* | **Date Adopted** | **Notes** |
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