Emergency Planning Information for Exelon Nuclear

Important Safety Information for Your Community

CALVERT CLIFFS • PEACH BOTTOM • NINE MILE POINT • LIMERICK • GINNA • FITZPATRICK
EMERGENCY PLANNING information for residents, workers and visitors within 10 miles of an Exelon nuclear power plant is now posted on our website: http://exelonemergencyplan.info

Additional emergency planning information for farmers, food processors and distributors is available from local and state emergency management agencies.

If you do not have access to the internet or a printer, please call Exelon at 800-220-2159 for a printed brochure.

If you wish to register with the County for special assistance, open fold below.

**People with Access & Functional Needs**

The information gathered by this postcard is CONFIDENTIAL and is only provided to public safety agencies to assist during an emergency.

Those who are deaf or hard of hearing, blind or have low vision, or have mobility disabilities may need assistance responding to an emergency. If you, or someone you know, would need specialized or transportation related assistance during an emergency, please complete the following postcard.

Simply drop the pre-paid and completed postcard in the mail. This information is updated annually. Please return this card even if you have previously responded. If you prefer, you may contact your local emergency management agency directly.

Please ONLY return this postcard if you responded “Yes” for any of the questions and need assistance during an emergency.

**Only return if answer is YES for any of the following questions:**

1. Deaf or hard of hearing (difficult to hear outdoor warning sirens or other emergency notifications)? Yes ☐  
2. Difficulty evacuating in an emergency? Yes ☐  
3. Without any personal means of transportation to evacuate in an emergency? Yes ☐  
4. Number of people in household? ____________  
5. Require medical attention for known condition if evacuated from your home? Yes ☐  
6. Without access to emergency alert messaging (no smart phone, television, or radio)? Yes ☐

Name: ____________________________________________  
Address (No P.O. Boxes): ____________________________________________  
City, State, Zip: ____________________________________________  
Municipality: ____________________________________________  
Telephone Number: ____________________________________________