

Emergency Special Needs Registry

The Offices of Emergency Management and the Mayor of Middlesex Borough are compiling a registry of individuals in the Borough who may require assistance or an evacuation of their home or business during an emergency such as flooding, gas leaks etc. Residents due to physical or other limitations or lack of transportation are encouraged and requested to complete the attached form and return it to *Office of Emergency Management, 1200 Mountain Ave, Middlesex, NJ. 08846*. These forms will be used to compile a “**special needs**” registry so that we will know who will need special help in advance of an emergency situation when time is of the essence.

Residents who are ambulatory or wheelchair bound, bedridden or critically ill, suffering from Alzheimer’s or a similar condition, diagnosed with impaired eyesight or loss of hearing or have limited mobility have a special need and should register with the Middlesex Office of Emergency Management. All information will remain confidential and will be used only in time of emergency evacuations. Establishing a “**special needs**” registry in advance will enable first responders to prepare and allow them to make the best use of limited time and resources to provide help to those with limited options for evacuation during an emergency.

If you or a member of your household have “**special needs**” that makes it difficult for you to successfully complete an evacuation of your home or place of business within the Borough of Middlesex during an emergency, please complete the “**special needs**” form and return it to us. With the right preparation today an emergency doesn’t have to be a disaster.

Please take a few minutes and return this form today. It could save your life or that of a loved one.

Emergency Special Needs Registry Form

With the right preparation, an emergency doesn't have to be disaster.

The Middlesex Borough Office of Emergency Management wants to know if you need help in the event of an emergency. If you or members of your household have a **'special need'** that would make it difficult for you to successfully evacuate your home or business during an emergency, please let us know who you are so we can help you. Please fill out the following form and return it to:

Office of Emergency Management
1200 Mountain Avenue
Middlesex, NJ 08846

Name of Special Need Person _____

Address _____

Phone Number (s) _____

Your Special Need(s) _____

Emergency Contact Person _____

Contact Person Phone _____

We are not waiting until disaster strikes, neither should you. Send your form in today.