



OFFICE OF EMERGENCY MANAGEMENT

ATTENTION RESIDENTS WITH SPECIAL NEEDS! (Adults, Children, & Seniors)

The Office of Emergency Management (OEM) would like to help you in times of serious storms, electrical outages, etc.

Please fill out the information below and return this form to:

Joanne Perry, OEM Deputy
1 Harding Plaza
Glen Rock, NJ 07452

If you need assistance with completing this form, please contact Joanne Perry at jperry@glenrocknj.net.

You can also fill out this form by visiting:

www.glenrocknj.net/resident/resources-for-residents-with-disabilities.

The information will be kept on a confidential list for use during times when you might need assistance.

Name of Resident In Need of Assistance: _____

Address: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Family Contact Name: _____

Phone Number: _____

Assistance Needed or Special Needs: _____

Date of Form Submitted: _____

Do you have a generator? Yes No

Do you have oxygen in the home? Yes No

Are you bedridden? Yes No

Is the Resident in Need Under 18? Yes No

If you don't receive phone alerts from the Borough, please visit: www.glenrocknj.net/resident/alerts to register.