



Recovery Location

Use this form to provide information on your recovery location(s), that is, where you will conduct business operations following an event. It could be at an alternate site, at a similar business through a mutual aid agreement, your own home, or if you are location dependent, at your primary place of business. You may require more than one location depending on a variety of factors, including departmental needs, number of employees, etc. If you identify more than one recovery location, be sure to clearly name each one in the *Recovery Location* field.

Note: If you have not secured your recovery location(s) at the time you are starting to develop this business continuity plan, continue on with the planning process. When you have finalized all arrangements for the recovery site(s), return to this form to enter the appropriate information.

You can download copies of this form from: http://www.disastersafety.org/business_protection.
Save a blank version so you can make additional copies as needed.

Recovery Location: <i>(Include street address, city, state, zip code)</i>			
Building Owner/Manager:			
Phone:		Alternate Phone:	
Pager:		E-mail:	
Directions To Recovery Location: <i>(i.e. map and directions from Internet site or similar information)</i>			
Business Functions To Be Performed At Recovery Location:			
Employees Who Should Go To Recovery Location:			
Recovery Notes:			