[Insert Company Logo]

**Emergency Procedure – Earthquake**

Template for SafetyCheck Users

**1. Immediate Response**

If an earthquake occurs:

**1.1 Drop, Cover, and Hold**

* **Drop** to the ground
* **Take cover** under a sturdy table, desk, or against an interior wall
* **Hold on** until the shaking stops

**1.2 Stay Indoors (If Safe)**

* If **inside**, stay inside — **do not run outside** during shaking
* Move away from windows, glass, shelving, and anything that could fall
* If **outside**, move away from buildings, power lines, and trees

**1.3 After the Shaking Stops**

* Check yourself and others for injuries - provide first aid if needed
* Be prepared for **aftershocks**
* Do **not use elevators**
* If safe, evacuate to the **designated assembly point**

**2. Assembly & Headcount**

* Proceed to the designated assembly point
* Do not re-enter buildings until **authorities declare them safe**
* The Site Manager / Foreman will conduct a headcount:

Site Manager: [Insert Name]
Contact Number: [Insert Number]

* Report any **missing persons immediately** to emergency services

**3. Special Considerations**

* Check for:
	+ **Gas leaks**
	+ **Damaged structures**
	+ **Electrical faults**
* If trapped:
	+ **Stay calm**
	+ Signal for help by **tapping on walls or pipes** — avoid yelling continuously

**4. Communication & Post-Earthquake Actions**

**4.1 Who to Notify After the Earthquake**

* Company Owner / Director: [Insert Name & Number]

**4.2 Post-Earthquake Actions**

* Await instructions from emergency services
* Do not resume work until the site has been inspected and declared safe
* Conduct an incident review and update emergency procedures if required

**5. Review & Training**

* This procedure will be reviewed **annually**, or after any significant earthquake event
* **Earthquake drills** will be conducted every: [Insert Frequency]
* All workers must be briefed on this procedure

**Company Details**

Company Name: [Insert Company/Trading Name]

Site Address: [Insert Site or Project Address]

Date of Last Review: [Insert Date]

Next Review Date: [Insert Date]

Signed: [Insert Signature or Name]