



Personal Emergency Evacuation Plan

Name	
Mobile telephone number	
Details of event being attended	
Name of person assisting – Friend / Partner	
Name of Registrar / Usher assigned to provide assistance	
Mobility issues: Visual impairment Are they visually impaired Y/N State the degree of impairment and if they require assistance to evacuate? Hearing impairment Hearing impairment Y/N State the degree of impairment and if they require assistance to evacuate? Wheelchair user - No/ Occasionally / Permanently Do they use a manual or powered chair? Can they transfer from the wheelchair to an evacuation chair? Y/ N/ With assistance Are they able to get down stair and out exits safely in an emergency? No / Yes – completely independent Yes – with some support Yes – with support / evacuation chair	
If the person is not a wheelchair user what other mobility aids do they use? Crutches / stick / walking frame	
Are there any further impairments or disabilities that may affect their ability to evacuate the building during fire alarm activations?	
Name of person completing PEEP.	