**FORM 1.1 – EMERGENCY CONTACT INFORMATION**

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| **EMERGENCY CONTACT INFORMATION** | | | | | | | |
| **PROJECT NAME** |  | | | | | | |
| **PROJECT ADDRESS** |  | | | | | | |
| **SITE CO-ORDINATES** |  | | **N** |  | | | **W** |
| **SITE CONTACT DETAILS** | | | | | | | |
| **NAME** | **ROLE** | | | | | **PHONE NUMBER** | |
|  |  | | | | |  | |
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|  |  | | | | |  | |
| EMERGENCY SERVICES CONTACT DETAILS | | | | | | | |
| **SERVICE** | **ADDRESS** | | | | | **PHONE NUMBER** | |
| **DOCTOR** |  | | | | |  | |
| **FIRE/GARDAÍ/AMBULANCE** |  | | | | | **999 OR 112** | |
| **UTILITY & SERVICE PROVIDERS** | | | | | | | |
| **ELECTRICITY (ESB NETWORKS)** | | **1850 372 999 (24HR)** | | | | | |
| **GAS NETWORKS IRELAND** | | **1850 20 50 50 (24HR)** | | | | | |
| **IRISH WATER** | | **1890 278 278** | | | | | |
| **HEALTH & SAFETY AUTHORITY** | | **1890 289 389** | | | | | |
|  | |  | | | | | |
| **ASSEMBLY AREA** | |  | | | | | |
| **EMERGENCY CO-ORDINATOR(S)** | **NAME** | | | | **PHONE** | | |