

Individual Evacuation Sheet



Company: _____
Division: _____
Facility: _____
Date: _____

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MERLENN® Operator System Use:

Use **MERLENN® Continuity SAR Plan Actions (SARPA)** and or Human Loss & Injury Accounting as applicable.

TRANSPORT CODE

A – Ambulance | **H** – Helicopter | **V** – Vehicle
O – Other

- Step 1** Print Evacuation Date & Time
- Step 2** Print First & Last Name
- Step 3** Mark Transportation Type
- Step 4** Enter Alternate Facility Name

Usage: Use MERLENN® Continuity Screens

DATE/TIME	INDIVIDUAL / TEAM	TYPE				FROM → TO LOCATION
		A	H	V	O	
		A	H	V	O	
		A	H	V	O	
		A	H	V	O	
		A	H	V	O	
		A	H	V	O	
		A	H	V	O	
		A	H	V	O	
		A	H	V	O	
		A	H	V	O	
		A	H	V	O	
		A	H	V	O	
		A	H	V	O	
		A	H	V	O	
		A	H	V	O	
		A	H	V	O	
		A	H	V	O	
		A	H	V	O	
		A	H	V	O	
		A	H	V	O	
		A	H	V	O	
		A	H	V	O	