

# Departmental Business Resumption Requirements

Date: \_\_\_\_\_

Name: \_\_\_\_\_ Department: \_\_\_\_\_

Please answer the following questions as complete as possible. This information will be used to identify the critical function and basic needs of your department in the event of a disaster. A critical function is a function that must resume operation as soon as possible because of serious repercussions that the organization would face.

## **List of clients, key vendors, customers, and/or contacts:**

**Name Address Telephone Contact File# Ct./Div. Case#**

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## **List your departmental functions (function that would cause serious repercussions to bottom line).**

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## **List minimum personnel needed to perform critical department functions:**

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**List equipment needed to perform critical department operations: (Exclude office furniture.)**

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**How much space will you require?**

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**List emergency supplies needed, excluding standard supply items that are readily available:**

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**List critical forms needed and approximate supply needed. (Attach hard copy of each form)**

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**List of vital and important records and if historical records should be kept off-site:**

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