

EBOR SAFETY PLAN

In an effort to promote the safety of all of our members and their customers/clients, the Egyptian Board of Realtors®, Inc. encourages all member offices to adopt the following safety plan.

1. Discuss safety with all agents and personnel in your office on a regular basis and educate them on possible dangers and hazards.
2. Develop a policy on meeting clients for the first time, client identification, a distress code system and a buddy system. (Sample Office Safety Action Plan attached)
3. Gather contact information on your agents and staff for use in the case of an emergency. (Sample Agent Identification Form attached).
4. Be sure someone in the office is aware of where you are and whom you are with. (Sample Agent Itinerary Form attached)
5. Gather contact information on prospects including a copy of a photo ID. When gathering information on prospects, be consistent to avoid possible discrimination. (Sample Prospect Identification Form attached)
6. Consider using one of the many mobile safety apps available.
7. Consider arranging for an expert to discuss and teach your agents and staff about self-defense including the use of pepper spray and/or mace products.

Office Safety Action Plan

Customize your own version of the Office Safety Action Plan with this worksheet.

Item/Policy	Suggestions
First-time meeting with clients	All agents must arrange to meet prospects and clients whom they have never met in the office rather than at properties, out of doors, or at home.
Client IDs	All first-time clients must provide a driver's license, state ID or other official photo ID. The office will make and retain a copy of this ID for security purposes
Distress code system	All employees, including officer personnel, will be educated on a single "distress code" to be used by agents calling in if they feel threatened
Buddy system	Agents who are uncomfortable meeting with clients alone or hosting open houses alone can request a "buddy" agent or employee to go with them.

EGYPTIAN BOARD OF REALTORS®, INC.

Agent Identification Form

This form is designed for our agents' safety and security. In case you have an accident or encounter other problems, this information will make it much easier for us to contact your family and/or law enforcement officials. All information will be kept confidential.

UPDATED: _____

NAME: _____

HOME ADDRESS: _____

CONTACT NUMBERS: (Include area codes)

MOBILE: _____ HOME: _____

PAGER: _____ HOME OFFICE: _____

OTHER: _____

EMERGENCY CONTACTS: (Provide at least one)

NAME	RELATIONSHIP	PHONE(S)
_____	_____	_____
_____	_____	_____
_____	_____	_____

AUTO: (List your most frequently used auto first)

MAKE & MODEL: _____ COLOR: _____

OWNER: _____

LICENSE NUMBER: _____ STATE: _____

2nd AUTO:

MAKE & MODEL: _____ COLOR: _____

OWNER: _____

LICENSE NUMBER: _____ STATE: _____

PRIMARY PHYSICIAN: _____ PHONE: _____

SPECIAL MEDICAL CONDITIONS/MEDICATION: _____

Note: Keep a record of your major credit card information in a safe, accessible place in case of an emergency, loss or theft of cards.

Agent Itinerary Form

This form is designed for your safety and security. Please leave the completed form with the receptionist, along with your showing itinerary information.

AGENT: _____ DATE: _____

CUSTOMER/CLIENT NAME(S): _____

- Personal Identification Form attached.
- Personal Identification Form already on file with _____

ANTICIPATED TIME OF RETURN TO OFFICE: _____ AM PM

MY CONTACT PHONE WHILE SHOWING PROPERTY: _____

COMMENTS: _____

Place Your Logo Here

Agent Itinerary Form

This form is designed for your safety and security. Please leave the completed form with the receptionist, along with your showing itinerary information.

AGENT: _____ DATE: _____

CUSTOMER/CLIENT NAME(S): _____

- Personal Identification Form attached.
- Personal Identification Form already on file with _____

ANTICIPATED TIME OF RETURN TO OFFICE: _____ AM PM

MY CONTACT PHONE WHILE SHOWING PROPERTY: _____

COMMENTS: _____

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Prospect Identification Form

This form is designed for your safety and security, along with that of property owners and our agents. We appreciate your consideration and cooperation. All security information is confidential and will not be sold or used for solicitation purposes.

This information may be subject to verification. Form is to be kept in branch office.

AGENT'S NAME: _____ DATE: _____

YOUR NAME(S): _____

HOME ADDRESS: _____

HOME & BUSINESS NUMBERS: _____

IN FROM OUT OF TOWN: _____ LOCAL CONTACT PHONE: _____

LOCAL ADDRESS: _____

I (WE) CAN BE CONTACTED AT THIS LOCATION UNTIL: _____

EMPLOYER: _____ PHONE: _____

AUTO

MAKE & MODEL: _____ COLOR: _____

OWNER: _____

LICENSE NUMBER: _____ STATE: _____

Photocopy Driver's License(s) or other Photo ID(s) and attach to this form.