

# EMERGENCY RESPONSE MANUAL

9 APPENDIX

9.2 APPENDIX 2 - CRISIS MANAGEMENT CENTER PREPARATION CHECKLIST

**Issue:** 00

**Revision:** 00

**Date:** 18-Feb-24

## 9.2 APPENDIX 2 - CRISIS MANAGEMENT CENTER PREPARATION CHECKLIST

Sl.	TASK	RESPONSIBLE	OK	OK TIME
1.	Inspection of the functionality of all communication channels (phone, mobile signal, internet fax)	ERP Manager	<input type="checkbox"/>	
2.	Inform Gate security about the list of staff entitled to enter the CMC.	DCSEC	<input type="checkbox"/>	
3.	Request additional security on entry to CMC, and OCC.	DCSEC	<input type="checkbox"/>	
6.	Submit updated information to Blake, and GACA.	ERP Manager	<input type="checkbox"/>	
7.	Preparation of copies of situation Report for CMT who are on the way.	ERP Manager	<input type="checkbox"/>	
8.	Order catering for 12 hours, delivered to CMC. Check availability of drinking water in dispensers.	ERP Manager	<input type="checkbox"/>	

Filled by:.....(name & signature)

Done on:...../...../.....(DD/MM/YYYY)



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9.3 APPENDIX 3 - BLAKE EMERGENCY NOTIFICATION

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## 9.3 APPENDIX 3 - BLAKE EMERGENCY NOTIFICATION

### FORM 1 – NOTIFICATION (AIRLINE)



To notify Blake Emergency of an incident or exercise, the initial contact must be made:

1. By telephone on: **+44 1298 815 786 or +44 2071 757 172 or +44 1623 786 721**
2. And then send this form by email to: [notification@blakeemergency.com](mailto:notification@blakeemergency.com)

The information required for the telephone call and email confirmation is:

(Please complete in BLOCK CAPITALS and include COUNTRY CODE in all telephone numbers)

Name of Company		Flight Number		(If codeshare flight, provide all flight numbers in the box at the bottom of this form.)	
IS THIS AN EXERCISE?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Type of Incident			
Location of Incident		Time of Incident			
		Location Local Time			
		UTC			
Number of Passengers	Male Female Child Infant	Number of crew	Flight Deck	Cabin Crew	Other
Casualty Status (if unknown insert 'N/K')		Uninjured	Hospitalised	Deceased	Missing
Your Details	Name				
	Job Title				
	Primary phone number	Country Code	Area Code	Number	
	Alternate phone number	Country Code	Area Code	Number	
	Mobile phone number	Country Code	Area Code	Number	
	Email address				
	Other Essential Contact Numbers	Emergency Management Centre (EMC)			
	EMC Director / Crisis Director				
	Emergency Planning Manager				
Any other relevant information at this time? (Include codeshare information)					

For Blake Emergency Completion Only:

Received at Blake by:		Date:	/ /	Time:	:
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© Blake Emergency  
James Allen House, 61-63 Buxton Road, Disley, SK12 2DZ  
www.blakeemergency.com  
Tel: +44 1298 815 786 or +44 2071 757 172 (24hrs)  
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Figure 9 - Blake Notification Details

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9.4 APPENDIX 4 – BLAKE ACTIVATION INSTRUCTION

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## 9.4 APPENDIX 4 – BLAKE ACTIVATION INSTRUCTION

### FORM 2 – ACTIVATION INSTRUCTION



When receiving the call back from Blake Initial Response Director, confirm all known details of the incident and agree initial level of activation.

Complete this form and email to [notification@blakeemergency.com](mailto:notification@blakeemergency.com).

Name of Company: \_\_\_\_\_

*Please tick the relevant boxes below*

Blake Emergency Response Services	Standby	Activate	Not required
Senior Advisor to Client Emergency Management Centre	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senior Advisor to Incident Site	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rapid Response Team	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Incident Response Team:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Family Assistance Team	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Identification Team	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Repatriation Team	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Property Team	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public Information Call Centre (if contracted)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Media Call Centre (if contracted)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Media Support (if contracted)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Counselling Support (if contracted)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Phone Number for the Airlines Media Call Centre	Country Code	Area Code	Phone Number
	+		

**AS A MEMBER OF THE EMERGENCY MANAGEMENT CENTRE, I CONFIRM I AM AUTHORISED TO ACTIVATE THE BLAKE EMERGENCY RESPONSE SERVICES SELECTED ABOVE.**

Name of Person Authorising Activation:	
Signature:	
Position:	
Date:	
Contact Tel:	
Alternative Tel:	
Mobile Tel:	
Email Address:	

Complete this form and email it to: [notification@blakeemergency.com](mailto:notification@blakeemergency.com).

*For Blake Emergency Completion Only:*

Received at Blake by: _____	Date: _____	Time: _____
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Tel: or +44 1298 815 786 (24hrs) or +44 2071 757 172 (24hrs)

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Figure 10 - Blake Activation Instruction

## 9.5 EMERGENCY CATEGORY "A" – CATASTROPHIC AIRCRAFT ACCIDENT – CHECKLIST

### 9.5.1 Master Checklist

### 9.5.2 AE – Checklist

### 9.5.3 VPCSSQE – Checklist

### 9.5.4 VPFO – Checklist

### 9.5.5 VP Technical Operations – Checklist

### 9.5.6 VP Treasury – Checklist

### 9.5.7 VP Ground Operations – Checklist

### 9.5.8 VP HR – Checklist

### 9.5.9 Director Corporate Safety – Checklist

### 9.5.10 Director Corporate Security – Checklist

### 9.5.11 Manager Crisis and Resilience Management – Checklist

### 9.5.12 General Counsel – Checklist

### 9.5.13 Director OCC – Checklist

### 9.5.14 Director Cabin Crew – Checklist



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9.6 EMERGENCY CATEGORY "B" – MISSING AIRCRAFT – CHECKLIST

**Issue:** 00

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### 9.6 EMERGENCY CATEGORY "B" – MISSING AIRCRAFT – CHECKLIST

#### 9.6.1 Master Checklist

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9.7 EMERGENCY CATEGORY "C" – SERIOUS INCIDENTS - STANDBY

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### 9.7 EMERGENCY CATEGORY "C" – SERIOUS INCIDENTS - STANDBY

#### 9.7.1 Master Checklist

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9.8	EMERGENCY CATEGORY “D” – SERIOUS INCIDENT NOT COVERED IN CATEGORY C

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**9.8      EMERGENCY CATEGORY “D” – SERIOUS INCIDENT NOT  
COVERED IN CATEGORY C**

**9.8.1    Master Checklist**

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### 9.9 EMERGENCY CATEGORY "E" – NATURAL DISASTER AND PANDEMIC

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## 9.9 EMERGENCY CATEGORY "E" – NATURAL DISASTER AND PANDEMIC

### 9.9.1 Master Checklist

### 9.9.2 AE – Checklist

### 9.9.3 VPCSSQE – Checklist

### 9.9.4 VP Treasury – Checklist

### 9.9.5 VP Ground Operation – Checklist

### 9.9.6 VP HR – Checklist

### 9.9.7 Director Cabin Crew – Checklist

### 9.9.8 Director Corporate Safety – Checklist

### 9.9.9 Director Corporate Security – Checklist

### 9.9.10 Manager Crisis and Resilience Management – Checklist

### 9.9.11 General Counsel – Checklist

### 9.9.12 OCC – Checklist