BUSINESS CONTINUITY PLAN

Company Name:	
Owner/Lead:	
Phone Number:	
Email:	
Address:	
Tax ID & Sales Tax License:	
Insurance	
Emergency Contacts	
Name:	Name:
Phone:	Phone:
Email:	Email:
Name:	Name:
Phone: Email:	Phone: Email:
Lindii.	Lilian.
Designer Contacts	
Name:	Name:
Phone:	Phone:
Email:	Email:
Name:	Name:
Phone: Email:	Phone: Email:
Elliali.	Elliali.
Wholesale Contacts	
Name:	Name:
Phone:	Phone:
Email:	Email:
1	
Name:	Name:
Phone: Email:	Phone: Email:
Eman.	Liliali.

BUSINESS CONTINUITY PLAN

Usernames & Passwords	
Phone:	
Email:	
Computer:	
Record Management System:	
Social Media:	

Other Things for Your Binder

Employee Information including Emergency Contact

Copy of Insurance Policy

Calendar with Event and Contact Information

Quick Glance Sheet for Each Event – Contact information for client, venue, vendors. Event description, colors, design plans, arrangements needed, and schedule. Flower order information and hard goods list.



This form is meant to help you gather the basic information necessary for your business to continue in a crisis. My hope is this becomes a starting point for designers to complete the work necessary to ensure that working during an emergency is a choice. Please reach out if you have any questions www.yellowtwist.com