Winter Emergency Car Kit Checklist: Prepare Before You Drive

PRINT • CHECK • REVIEW

Ready & Resourceful | Updated October 8, 2026

https://readyresourceful.com/preparedness/winter-emergency-car-kit/

Household/group: _____

Date reviewed: _____

Conditions or destination: _____

- [ ] Warm coats or spare insulating layers for each person.
- [ ] Hats, gloves, dry socks, and weather-appropriate footwear.
- [ ] Blankets or suitable sleeping bags.
- [ ] Drinking water protected from leakage and regularly checked.
- [ ] Familiar snacks that can be eaten without cooking.
- [ ] Flashlight or headlamp with the necessary power supply.
- [ ] Charged phone, correct cable, vehicle charger, and a charged power bank.
- [ ] Written emergency contacts and roadside-assistance information.
- [ ] First-aid kit, personal medication plan, and essential health information.
- [ ] Ice scraper, snow brush, and suitable gloves for clearing the vehicle.
- [ ] Reflective equipment or warning devices suitable for the vehicle and local requirements.
- [ ] Vehicle-specific basic tools or recovery equipment only where you have the knowledge to use them.
- [ ] Hygiene supplies, waste bags, and items for children or pets travelling with you.

READY CHECK

- [ ] Inspect condition and compatibility; replace missing or damaged items.
- [ ] Record where critical supplies are and who can retrieve them.
- [ ] Adapt quantities and supplies to the people, conditions and official instructions.
- [ ] Write down a backup or relocation arrangement.

Items to add: _____

Next review: _____

Read the full guide for limitations and safety context. This planning sheet is not emergency instructions or a guarantee of safety. Follow current official guidance. AI-assisted compilation; no field-testing claim.

References from the guide:

https://www.weather.gov/media/top/prepare/CarWinterSurvivalKitChecklist.pdf

https://www.weather.gov/safety/winter-during

https://www.cdc.gov/winter-weather/safety/stay-safe-during-after-a-winter-storm-safety.html

MY NEXT ACTION

Task / person responsible: _____

Review date: _____ Completed date: _____