

**MORRIS PLAINS POLICE DEPARTMENT**  
**BUSINESS EMERGENCY CONTACT REGISTRATION**

Business Name: \_\_\_\_\_

Address: \_\_\_\_\_

Owner/Operator of Business: \_\_\_\_\_

Hours: \_\_\_\_\_ Phone: (H) \_\_\_\_\_ (W) \_\_\_\_\_

Owner of Building: \_\_\_\_\_ Phone: (H) \_\_\_\_\_ (W) \_\_\_\_\_

Alarm Company: \_\_\_\_\_ Fire  Burglar

Alarm Company Phone No: \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION**

1. Name: \_\_\_\_\_ Town: \_\_\_\_\_ Phone: \_\_\_\_\_

2. Name: \_\_\_\_\_ Town: \_\_\_\_\_ Phone: \_\_\_\_\_

3. Name: \_\_\_\_\_ Town: \_\_\_\_\_ Phone: \_\_\_\_\_

4. Name: \_\_\_\_\_ Town: \_\_\_\_\_ Phone: \_\_\_\_\_

**LOCATION OF:**

Gas: \_\_\_\_\_ Electric: \_\_\_\_\_ Water: \_\_\_\_\_

Alarm: \_\_\_\_\_ Sprinkler: \_\_\_\_\_ Other: \_\_\_\_\_

Hazardous Material: \_\_\_\_\_

Material Type: \_\_\_\_\_

Comments: \_\_\_\_\_

Please notify us in the future with any changes that may occur so we can keep our information up to date and continue to serve you.

Thank you for your cooperation in this matter.

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