DATE: _____

BUSINESS EMERGENCY CONTACT INFORMATION

Please mail, fax or drop this form by the police department

501 W. Route 66, Williams, AZ 86046 (Fax # 928-635-1415)

email: wpdinfo@williamsaz.gov

Please PRINT legibly

BUSINESS NAME: _____

BUSINESS ADDRESS: _____

BUSINESS PHONE: (_____) _____ BUSINESS CELL: (_____) _____

BUSINESS CELL CARRIER: (Verizon, ATT, Sprint, etc., for **CodeRED**) _____

OWNER(s) NAME: _____

HOME ADDRESS: _____

HOME PHONE: (_____) _____ CELL NUMBER: (_____) _____

CELL NUMBER CARRIER: (Verizon, ATT, Sprint, etc., for **CodeRED**) _____

EMAIL ADDRESS (for CodeRED): _____

1ST EMERGENCY CONTACT NAME: _____

HOME PHONE: (_____) _____ CELL NUMBER: (_____) _____

CELL NUMBER CARRIER: (Verizon, ATT, Sprint, etc., for **CodeRED**) _____

2ND EMERGENCY CONTACT NAME: _____

HOME PHONE: (_____) _____ CELL NUMBER: (_____) _____

CELL NUMBER CARRIER: (Verizon, ATT, Sprint, etc., for **CodeRED**) _____

ALARMS: YES NO ← **(please circle one)**

ALARM COMPANY NAME: _____

ALARM COMPANY PHONE: (_____) _____

TYPE OF ALARM: (FIRE, BURG, MOTION) _____

ALARM LOCATION: _____

NUMBER AND LOCATION OF ENTRANCES TO BUSINESS: _____

_____

ANY ADDITIONAL INFORMATION THAT MAY BE HELPFUL TO POLICE IN AN EMERGENCY SITUATION:

_____

_____

PLEASE DO NOT WRITE BELOW THIS LINE

For Police Department use ONLY:

ENTERED INTO ILEADS: Date: _____ Initials: _____