

BREWSTER POLICE DEPARTMENT

Chief Heath J. Eldredge

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Brewster, Massachusetts 02631

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ALARM LISTING FORM

In the event of an emergency, it is sometimes necessary to have information that provides us with the ability to contact business owners and caretakers 24 hours a day. The data you provide below will be for our records only and will not be available to the public.

Name of Business: _____

Business Address: _____

Business Phone: _____ **Fax** _____

Email Address: _____ **Website** _____

Owner: _____

Owner Address: _____

Primary Contact Name: _____ **has key?** _____

Primary Contact Address: _____

Primary Contact Phone Number (s): _____

Alternate Contact Name: _____ **has key?** _____

Alternate Contact Address: _____

Alternate Contact Phone Numbers (s): _____

Business Alarmed? YES – NO **Type:** BURGLAR – FIRE – BOTH

Alarm Company: _____

Alarm Company Phone Number: _____

Additional Comments: Are there any special circumstances we should be aware of? (pets on location, guard dog, seasonal opening only, hazardous materials, etc.)

Signature of business owner or designee _____ **Date:** _____

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