

## Epsom Police Department

980 SUNCOOK VALLEY HIGHWAY EPSOM, NEW HAMPSHIRE 03234

WAYNE B. PREVE
Chief of Police

EMERGENCY (603) 736-4445 BUSINESS (603) 736-9624 FAX (603) 736-8421

## **ALARM INFORMATION & EMERGENCY CONTACT**

(COMPLETE BOTH SIDES OF FORM)

<b>BUSINESS / RESIDEN</b>	ICE INFORMATION				
Location Name:	(Busineys i Realdence	Karnel	Location Phone	: (Summess / Re	sidence Physis)
Location Address:	(2)(3)	i Name Munber a	and Unit or Apartme	or Nomber)	
Directions to Location:	(include Landmarks ar	d Cross Streets. V	which Side of the Ro	ad? Is there a Sher	red Driveway?
		*			
Building Description: _	(Color and Type of Bu	ilding, Le. Garage	Office, Store, Capa	r. Duplex, Nobile H	ime, etc.).
Hours of Operation: S	un Mon	Tue W	ed Thu _	Fri	Sat
ALARM INFORMATIO	N				
Monitoring Company:			Phone	•	
Address:					
(Street Name &	Number)		City / Town	State	Zip Code
Date of Installation: _		Installer:			
	☐ Audible ☐ Intrus		ion Detector [		☐ Fire
Type of Alarm:	☐ Silent ☐ Busir			□ Digital Dial	☐ Burglary
(check all that apply)	☐ Direct to Police Disp	atch 🗆 Dire	ect to Private Alar	m Monitoring Co	mpany
	☐ Other (Describe)				
OWNER INFORMATIO	N				
	(Business / Residence	Ownery	Owner's Phone	: (Best Phone to	Contact Owner)
Address:				List Corporate Add	reasi
(Street Name, N	lumber & Apartment)		City / Town	State	Zip Code
Owner 2 Name:	(Business / Residence	Ownery	Owner's Phone	(Best Phone to	Contact Owner
Address:	wnsda Residence if Differe	it toah Alama Loca	nog, li Comeration,	List Corporate Add	ress)
(Street Name, N	lumber & Apartment)		City / Town	State	Zip Code

EMERGENCY CONTACT INFORMATION						
When alarm sounds, DAY or NIGHT, who can we notify to respremises? (List at least <b>TWO</b> separate parties.)	et the alarm system and, if necessary, open the					
Emergency Contact #1:	Telephone (Day):					
Address:						
Emergency Contact #2:	Telephone (Day):					
Address:						
Emergency Contact #3:	Telephone (Day):					
Address:	Telephone (Night):					
Emergency Contact #4:	Telephone (Day):					
Address:	Telephone (Night):					
OCCUPANT(S) INFORMATION Other than the owner(s) and emergency contacts, list anyone else who resides at or has permission to be at this location.						
NOTES, SPECIAL CONSIDERATION and OTHER INFORMATION  Please list any notes, special considerations and/or other information that the Epsom Police Department and/or Epsom Fire Department should be aware of if they respond to this location for an emergency. Please consider listing items such as; Are there pets at this location? Are there firearms or other weapons at this location? Are there any explosives or hazardous materials at this location? Do persons with special needs and/or disabilities reside at this location?						
DEPARTMENT USE ONLY						
Date Received: D	ate Entered:					
-	Site Number:					
	Entering the control of the control					