



"To Protect and Serve"

# WESTPORT POLICE DEPARTMENT

50 Jesup Road Westport, CT 06880  
203-341-6000

FORM #

**PD-22**  
REV 2-17

Form Title

## EMERGENCY INFORMATION FORM

The Westport Police Department maintains computerized records of emergency information on all businesses located in town. This information is necessary in order to contact representatives of business in the event of some type of emergency at their business location during non-business hours. It is imperative that this information be kept up to date and business owners/managers should notify the department of any changes as they occur so that this service can be continued in an efficient manner.

### BUSINESS INFORMATION

NAME OF BUSINESS:

STREET ADDRESS IN WESTPORT:

LOCAL PHONE NUMBER DURING BUSINESS HOURS:

ALARM COMPANY OR MONITORING SERVICE THAT CALLS US:

24 HR. PHONE NUMBER

### OWNER INFORMATION

OWNER'S NAME (OWNER OR MANAGER, A PERSON, NOT CORPORATE NAMES):

OWNER'S HOME ADDRESS (STREET ADDRESS OF RESIDENCE, NOT MAILING ADDRESS):

OWNER'S HOME PHONE NUMBER:

OWNER'S LOCAL POLICE DEPARTMENT NAME AND PHONE NUMBER:

### EMERGENCY CALL INFORMATION

**1<sup>ST</sup> PERSON**

FIRST NAME, LAST NAME AND PHONE NUMBER:

**2<sup>ND</sup> PERSON**

FIRST NAME, LAST NAME AND PHONE NUMBER:

**3<sup>RD</sup> PERSON**

FIRST NAME, LAST NAME AND PHONE NUMBER:

**NOTE: IN THE EVENT OF AN EMERGENCY, THE ABOVE PERSONS WILL BE CALLED IN ORDER. IF THEY CANNOT BE CONTACTED BY PHONE, THE OWNER OF THE BUSINESS WILL BE CALLED. IF HE/SHE CANNOT BE CONTACTED BY PHONE, THE LOCAL POLICE WILL BE SENT TO THE OWNERS HOUSE TO NOTIFY HIM/HER TO CONTACT HIS DEPARTMENT IMMEDIATELY.**

**OFFICE USE ONLY:**

ENTERED

DATE \_\_\_\_\_

BY \_\_\_\_\_