

**HAWLEY POLICE DEPARTMENT  
BUSINESS INFORMATION SHEET**

*Please Print Legibly*

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

Business Physical Location \_\_\_\_\_

Mailing Address \_\_\_\_\_

Type of Business \_\_\_\_\_  Year-Round  Seasonal

Business Telephone Number(s) \_\_\_\_\_

Business Hours (and months if seasonal) \_\_\_\_\_

If Seasonal, Off Season Contact Telephone Number \_\_\_\_\_

Alarmed  Yes or  No If yes,  Burglar or  Fire or  Both

Auto Reset  Yes or  No  Audible  Silent (Hold Up)

Alarm Company Name \_\_\_\_\_

Alarm Company Address \_\_\_\_\_

Alarm Company Telephone Number \_\_\_\_\_

**Emergency Contact Information**

Business Owner(s) \_\_\_\_\_

Primary Address \_\_\_\_\_

Seasonal Address, if applicable \_\_\_\_\_

Telephone Numbers (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_ (Pager) \_\_\_\_\_

Email Address (optional) \_\_\_\_\_

Do you wish to be contacted by the police department with police alerts by email address below?

( ) YES ( ) NO

**In case of an alarm or an after hours incident at your business, please list the people who you wished to be contacted, including yourself if applicable:**

First Person to Contact \_\_\_\_\_ Response Time \_\_\_\_\_

Contact Number (Home) \_\_\_\_\_ (Other) \_\_\_\_\_

Second Person to Contact \_\_\_\_\_ Response Time \_\_\_\_\_

Contact Number (Home) \_\_\_\_\_ (Other) \_\_\_\_\_

Third Person to Contact \_\_\_\_\_ Response Time \_\_\_\_\_

Contact Number (Home) \_\_\_\_\_ (Other) \_\_\_\_\_

Fourth Person to Contact \_\_\_\_\_ Response Time \_\_\_\_\_

Contact Number (Home) \_\_\_\_\_ (Other) \_\_\_\_\_

**Once a contact person is no longer affiliated with your business or for other changes, please contact Chief Glen N. Hanson at the Hawley Police Department ph# 483-4866.**

Additional Notes / Comments

\_\_\_\_\_

Person Completing Form \_\_\_\_\_ Date \_\_\_\_\_