

POLICE DEPARTMENT
Emergency Contact Form

Charles R. Burnett, Chief of Police
27665 Jefferson Ave.
St. Clair Shores, MI 48081-2098

Information	586-445-5300
Detectives	586-445-5305
Juvenile	586-445-5310
Traffic	586-445-5318
Records/Licenses	586-445-5315
Chief of Police	586-445-5320
Special Invest.	586-445-5342

Dear Business Owner:

In order to assist us in the protection of your business, please fill out the form below. It is most important that the information be filled out and returned to the Police Department at your earliest convenience.

Charles R. Burnett
Chief of Police

Business Name _____

Business Address _____

Business Phone _____

Business Owner _____

Home Address _____

City _____ State _____ Zip _____

Home Phone _____

List three people to call in the case of an emergency:

_____ Phone _____

_____ Phone _____

_____ Phone _____

Alarm Company _____

If you have an alarm system on the premises, you must register that system with the Police Department. Contact 445-5315 to obtain a registration form. Failure to register may result in a fine.

Please list any hazardous materials that will be stored at this location:

POLICE DEPARTMENT
Alarm Registration Form

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ALARM LOCATION

Business Name _____
Address _____ City, State, Zip _____ Telephone _____

OWNER

Business/Residence Owner _____
Address _____ City, State, Zip _____ Telephone _____

CONTACT PERSONS *(if owner is unable to be contacted)*

Name _____	Home Phone _____	Business Phone _____
Name _____	Home Phone _____	Business Phone _____
Name _____	Home Phone _____	Business Phone _____

BILLING ADDRESS *(if different than alarm location)*

Address _____ City, State, Zip _____

ALARM SYSTEM INFORMATION

Alarm Company _____
Address _____ City, State, Zip _____
 Burglar Fire Hold Up Medical Other
Type of Alarm _____
Central Station Monitor: Yes No

ALARM MONITORING COMPANY

Company _____
Address _____ City, State, Zip _____
Telephone _____ State License Number _____

I have read and understand the provisions of the St. Clair Shores Alarm Ordinance.

Applicant Signature _____ Date _____

Revise: 5/22/07