

Business Emergency Contact Information

Dexter Area Fire Department
Inspector Donald Dettling

Washtenaw County Sheriff's Office
Sergeant Brian Filipiak

Business Name: _____ Date: _____

Business Address: _____ City: _____ Zip: _____

Business Phone #1: _____ Business Phone #2: _____

Mon _____ Tue _____ Wed _____ Thr _____ Fri _____ Sat _____ Sun _____

(List hours of operation for each day—use C if closed for entire day)

Alarm: Yes No Alarm Company _____ Alarm Co. Phone _____

Type of Alarm System _____ Knox Box: Yes No

BUSINESS Owner Information

Owner of Business: _____

Home Address of Owner: _____ City: _____ Zip: _____

Owner Home Phone: _____ Cell: _____ Pager: _____

BUILDING Owner Information

If Business and Building Owner Information is the same check here and go to Contact Information: _____

Owner of Building _____

Address of Owner: _____ City: _____ Zip: _____

Owner Home Phone: _____ Cell: _____ Pager: _____

EMERGENCY CONTACT INFORMATION—AFTER HOURS

(Provide at least two emergency contacts. Contacts will be contacted prior to business owner unless business owner is listed as a contact)

First Contact:

Name: _____ Relation to Business: _____

Home Address: _____

Home Phone: _____ Cell: _____ Pager: _____

Second Contact:

Name: _____ Relation to Business: _____

Home Address: _____

Home Phone: _____ Cell: _____ Pager: _____

Third Contact:

Name: _____ Relation to Business: _____

Home Address: _____

Home Phone: _____ Cell: _____ Pager: _____

Mail Forms to: DAFD/WCSO
8140 Main Street
Dexter, MI 48130

Fax Forms to: (734) 426-8537 (Secure Fax)

Drop Forms off to: Washtenaw County Sheriff's Office—Dexter Station
Dexter Area Fire Department