

SODUS POINT POLICE DEPARTMENT

EMERGENCY CONTACT INFORMATION
(PLEASE PRINT LEGIBLY)

DATE: _____

NAME: _____

STREET ADDRESS: _____, SODUS POINT, NY

PHONE # _____

EMERGENCY NOTIFICATION INFORMATION

I PLAN ON BEING AWAY FROM _____ UNTIL _____.

IN THE EVENT OF AN EMERGENCY AT THE ABOVE LISTED PROPERTY,
I WOULD LIKE THE POLICE DEPT TO:
(FILL IN APPLICABLE SECTIONS)

NOTIFY ME DIRECTLY AT: _____

NOTIFY ALTERNATE PERSON: _____
(NAME)

AT: _____ PHONE# _____

DOES ALTERNATE HAVE ACCESS TO HOME: YES NO

**COMPLETE FOLLOWING SECTION ONLY IF YOU REQUEST THAT YOUR PROPERTY
BE CHECKED PERIODICALLY BY THE POLICE DEPT.**

HOUSE IS ALARMED: YES NO

PERSONS AUTHORIZED TO BE ON PROPERTY (IE CHECKING FURNACE, CHILD STOPPING
IN PERIODICALLY ETC)

NAME: _____

VEHICLE PLATE NUMBER OR DESCRIPTION: _____
(USE BACK OF FORM IF MORE SPACE NEEDED)

ADDITIONAL COMMENTS OR CONCERNS: _____

PLEASE CALL THE VILLAGE OFFICE, 483-9881 UPON YOUR RETURN HOME, THANK YOU