

Commercial Emergency Contact Sheet

Please fill in the information and mail it to the Sheriff's Office Communications Division. The information will be kept on file and used in case the Sheriff's Office needs to contact a person responsible for the business in question.

Business Name: _____
Physical Address: _____ Phone: _____
Owner's Name: _____
Mailing Address: _____
Email: _____
Business Type (check one): _____ Retail _____ Wholesale
_____ Warehouse _____ Manufacturer
_____ Other (Please Specify) _____

Is the business equipped with a video surveillance system? _____ Yes _____ No
Is the building equipped with an alarm system? _____ Yes _____ No
Is the alarm monitored by an alarm company? _____ Yes _____ No
If so, which company monitor's it? _____
Contact information for the alarm company _____
If the alarm is only a premises alarm, what type is it:
_____ Audible only _____ Motion Alarm _____ Combination
_____ Other (please explain) _____

Emergency Contact List (please list in the order you wish them to be called):
1. Name and Address: _____
Home Phone: _____ Mobile Phone: _____
2. Name and Address: _____
Home Phone: _____ Mobile Phone: _____
3. Name and Address: _____
Home Phone: _____ Mobile Phone: _____
4. Name and Address: _____
Home Phone: _____ Mobile Phone: _____

If you have any questions, please contact the Sheriff's Office Communications Division (305) 289-2351

Send these forms to:
Sheriff's Office Communications/Dispatch
c/o Marathon Substation
3103 Overseas Highway
Marathon, FL 33050

**Please Notify the Sheriff's Office within 48 hours of any change in the above information.