

North Hampton Police Department  
Emergency Notification Information

Dear Business/Homeowner,

Please assist us with updating your emergency listing information so that we may better respond to any given emergency at your address. Complete the form in the spaces provided being as thorough as possible. This will insure our officers responding to your home or business have all necessary contact information when you may or may not be at your alarm location. Should you have any questions regarding your listing or in completing this form you may contact us at 964-8621, Monday through Friday, from 9:00 a.m. - 4: 00 p.m. As a reminder, any time you make changes of emergency contact persons please forward the information to us.

NAME OF BUSINESS:\_\_\_\_\_

OR

NAME OF RESIDENCE:\_\_\_\_\_

Last

First

MI

STREET ADDRESS # \_\_\_\_\_

AND

MAILING ADDRESS (IF DIFFERENT) \_\_\_\_\_

PHONE NUMBER FOR THE ADDRESS: ( 603 ) \_\_\_\_\_

PRIMARY EMERGENCY CONTACT INFORMATION: \_\_\_\_\_

(List owner of property or manager)

Last

First

MI

Phone # (     ) \_\_\_\_\_

ALTERNATE: \_\_\_\_\_

EMERGENCY CONTACT

Last

First

MI

Phone # (     ) \_\_\_\_\_

ALTERNATE \_\_\_\_\_

EMERGENCY CONTACT:

Last

First

MI

Phone # (     ) \_\_\_\_\_

NAME OF ALARM COMPANY: \_\_\_\_\_

Address \_\_\_\_\_ Phone # (     ) \_\_\_\_\_

COMMENTS OR CAUTIONS KNOWN OF THE PROPERTY (List any potential hazards within the interior or exterior of the business or residence, chemicals, explosives, yard obstructions, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TYPE OF ALARM: POLICE / FIRE / BOTH / MEDICAL ALERT/ OTHER  
RESIDENTIAL   OR COMMERCIAL

**FOR OFFICE USE:**

**BOX/SITE NUMBER** \_\_\_\_\_ **DATE ENTERED** \_\_\_\_\_