

**MOUNT KISCO POLICE DEPARTMENT  
ALARM DATA ENTRY SHEET**

**BUSINESS or RESIDENT NAME** \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Address \_\_\_\_\_ Apt/Suite # \_\_\_\_\_

City/Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number (914) \_\_\_\_\_

Email Address \_\_\_\_\_

**ALARM COMPANY/INSTALLER/MONITORING COMPANY INFORMATION**

Alarm Company Name \_\_\_\_\_

Address \_\_\_\_\_ City/State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

**Alarm Type(s) Burglar/Fire/Holdup/Medical/Panic (circle one or more)**

Guard Dog \_\_\_\_\_ Weapons & Location \_\_\_\_\_

Night Light \_\_\_\_\_

**HAZARDOUS MATERIAL**

**HAZARDOUS MATERIAL TYPE & LOCATION**

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**Please Note: If there are any changes during the year that might affect the information you have supplied us, it is your responsibility to notify this department in writing as soon as possible so that changes may be made in our computer system.**

**EMERGENCY CONTACT INFORMATION**

**Contact No. 1**

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ City/State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone 1 \_\_\_\_\_ Telephone 2 \_\_\_\_\_

Comments: \_\_\_\_\_

**Contact No. 2**

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ City/State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone 1 \_\_\_\_\_ Telephone 2 \_\_\_\_\_

Comments: \_\_\_\_\_

**Contact No. 3**

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ City/State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone 1 \_\_\_\_\_ Telephone 2 \_\_\_\_\_

Comments: \_\_\_\_\_

**Contact No. 4**

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ City/State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone 1 \_\_\_\_\_ Telephone 2 \_\_\_\_\_

Comments: \_\_\_\_\_