

LACONIA POLICE DEPARTMENT
Laconia, New Hampshire

BUSINESS CALL UPDATE

The following information is requested from you in order to assist the Laconia Police Department in contacting the property personnel should there be a problem with your building/business.

Business Name: _____

Address: _____

Telephone Number(s): _____

Additional Directions: _____

Business Owner: _____

Address: _____

Home Phone#: _____ Cell Phone#: _____

Business Key Holders: (in order to call)

1. _____ Ph# _____ Cell# _____

2. _____ Ph# _____ Cell# _____

3. _____ Ph# _____ Cell# _____

Does business have a safe? Yes ☐ No ☐ Location: _____

Any possible danger areas for Officers to be aware of: _____

Motion exterior lights? Yes ☐ No ☐ Alarm? Yes ☐ No ☐

Does alarm reset? Yes ☐ No ☐ How long: _____

Alarm Company: _____

Phone #: _____ Alt. Phone #: _____

Could you provide a blueprint of your building to the police department? Yes ☐ No ☐

Date: _____ Patrol Sector: _____ Dispatch Updated: _____

Date/Initials