

FAYETTE COUNTY E-911 COMMUNICATIONS

EMERGENCY CONTACT FORM

Name of Business: _____

Business Address: _____

Prior Address of Business (if applicable): _____

Prior Business Name (if applicable): _____

Business Phone Number: _____

Business Owner(s) Name: _____

Owner(s) Home Phone Number: _____
(Emergency Use Only)

Email Address: _____

Building Owner: _____

Building Owner's Phone Number: _____

Emergency Contact: (Someone who can gain access to the business after normal business hours in case of: Fire, Burglar Alarm, or Other Emergency)

1) Name _____ Phone # _____

2) Name _____ Phone # _____

3) Name _____ Phone # _____

Please send a copy of this form to: Fayette County E-9-1-1 Communications
140 Stonewall Avenue West
Fayetteville, GA 30214
770-461-4357
770-461-5935 - Fax