## THE COUNTY OF YORK

BOARD OF COMMISSIONERS Steve Chronister, President Dqwi 'J qng, Vice President Cj tku Tgkm(, Commissioner



Charles R. Noll Administrator-Chief Clerk Donald Reihart Solicitor

## **Department of Emergency Services**

## **Business Emergency Phone Contact Information**

Please fill in the following after hours emergency contact information for your business. Name is as seen on the sign outside. Twp or Boro and Street Address are the physical location of the business not the mailing address. List each contact person and phone contact information in the order that you prefer them to be called. Please advise if the phone number is home, cell, or other, and return this form by mail, fax or email to the addresses or phone numbers listed at the bottom of this form. Any questions contact us.

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Name of Business:			
Township or Boro Locatio	on of Business:		
Street Address:			
Daytime Business Phone:			
Emergency Phone Contact	ts		
<u>Name</u>	First Phone	Second Phone	Third Phone
1.			
2.			
3.			
4.			
5.			
6.			

Please Print Clearly

Please send the information to the Department of Emergency Services to the attention of the Data Entry Department At the address below or fax number or email. Any questions contact us.