



## **KEYHOLDER NOTIFICATION AND ALARM LIST**

Business Name \_\_\_\_\_  
Business Street Address and Post Office Number \_\_\_\_\_  
Phone Number \_\_\_\_\_

### ***PERSON TO BE CONTACTED IN CASE OF EMERGENCY***

1. \_\_\_\_\_ Phone & Cell Number \_\_\_\_\_  
2. \_\_\_\_\_ Phone & Cell Number \_\_\_\_\_  
3. \_\_\_\_\_ Phone & Cell Number \_\_\_\_\_

Is your business equipped with an alarm? \_\_\_\_\_ YES \_\_\_\_\_ NO

If so, which door(s) or windows? \_\_\_\_\_

Is your business equipped with video surveillance? \_\_\_\_\_ YES \_\_\_\_\_ NO

Who is the Alarm Through? \_\_\_\_\_

### ***Remarks:***

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

The information that is provided here is for internal sheriff's department use only. Under no circumstances will it be released to the public for any reason.

The Clayton County Communications Department wishes to thank you for your cooperation. By completing this form you are making our job helping you so much easier.

Professionally,  
Clayton County Communications  
Clayton County Sheriff's Department