Town of Center Harbor
POLICE DEPARTMENT
36 Main Street, Center Harbor, NH 03226
P: 603-253-9756 F: 603-253-8241

BUSINESS SECURITY INFORMATION FORM

Please fill in ALL information requested to help ensure the safety of our officers while checking businesses or responding to alarms. Completion of this form does not guarantee your business will be safe from vandalism or burglary, but provides the police/fire departments with information necessary to ensure a safe and timely response.

Business Information

Business Name:

Physical Address:

Mailing Address (if different):

Phone: **Fax:**

Do You Have a Cleaning Crew? ☐ Yes ☐ No

If Yes, Company Name: **Phone:**

Emergency Contacts (List at least 3 people with keys who can respond — list in order to be called)

1. **Phone:**
2. **Phone:**
3. **Phone:**
4. **Phone:**

Alarm System

Do You Have an Alarm System? ☐ Yes ☐ No

Type of Alarm:

☐ Audible ☐ Silent ☐ Burglary ☐ Panic
☐ Fire ☐ Low Temp ☐ Carbon Monoxide ☐ Other

Fire Alarms Only — Location of Knox Box:

Alarm Monitoring Company: **Phone:**

Please turn over to complete this form →

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BUSINESS SECURITY INFORMATION FORM

Business Hours

	Summer		Winter	
	Open	Closed	Open	Closed
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				
Sunday				

Building Access (Does anyone else have access to your business? If so, who?)

1. _____ Phone: _____
2. _____ Phone: _____
3. _____ Phone: _____

Additional Notes / Special Instructions (Additional information may be supplied on a separate sheet if needed)

Signature of Person Completing Form: _____ Date: _____

To submit a Business Security Information Form, please complete and return this form to:

- **Mail (Preferred):** Center Harbor Police Department, PO Box 140, Center Harbor, NH 03226
- **In Person:** Center Harbor Police Department, 36 Main Street, Center Harbor, NH 03226