



NORTH KANSAS CITY BUSINESS EMERGENCY CONTACT INFORMATION

Business Name: _____

Address: _____ Phone: _____

Manager Name: _____

Address: _____

Phone1: _____ Phone 2: _____

IN CASE OF EMERGENCY CALL:

1. Name: _____

City, State, Zip: _____

Phone 1: _____

Phone 2: _____

2. Name: _____

City, State, Zip: _____

Phone 1: _____

Phone 2: _____

3. Name: _____

City, State, Zip: _____

Phone 1: _____

Phone 2: _____

Remarks (Alarm Company, Phone #, Watchman):