



**MAYOR AND CITY COUNCIL OF LAUREL  
OFFICE OF THE FIRE MARSHAL AND PERMIT SERVICES**

**8103 Sandy Spring Road • Laurel, Maryland 20707-2502**  
 Phone: (301) 725-5300 FAX (301) 490-5068 • Web: <http://www.cityoflaurel.org>  
 Email: [fmops@laurel.md.us](mailto:fmops@laurel.md.us)



**BUSINESS EMERGENCY CONTACT INFORMATION FORM**

Date: \_\_\_\_\_ Permit No. \_\_\_\_\_

To properly serve our community, it is crucial that the emergency contact listings of the City of Laurel Emergency Services Office and Laurel Police Department be kept up to date. This form, when completed by you, will greatly aid us in this endeavor. The information that you provide below will only be used by local public safety officials and references listed will only be contacted when necessary. Should you, at any time, desire to make any change in your listing (after an employee's termination, for example), please contact the Office of the Fire Marshal and Permit Services with the updated contact information. This Office will ensure that the information is provided to the proper agencies in a timely fashion. **You may wish to make copies of this form and update it periodically.**

Please complete this form and return to:

City of Laurel  
 Office of the Fire Marshal and Permit Services  
 8103 Sandy Spring Road  
 Laurel, Maryland 20707

Your cooperation in this effort is greatly appreciated.

Business Name: \_\_\_\_\_

Corporate/Trade Name: \_\_\_\_\_

Location Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone No.: (        ) \_\_\_\_\_ - \_\_\_\_\_

Persons to be contacted in the event of an emergency: (Please list **ONLY** persons who have access and knowledge of your business and list in the order that they should be contacted):

(Name)	(Address)	(Area Code/Phone)

**Alarm Company Information:**

Name of Alarm Company: \_\_\_\_\_

Address of Alarm Company: \_\_\_\_\_

Telephone No. of Alarm Company: \_\_\_\_\_