



Chambersburg Fire Department

130 North Second Street • Chambersburg, PA 17201-1640
Telephone: (717) 261-3230
Fax: (717) 261-3296



BUSINESS INFORMATION / EMERGENCY CONTACT FORM

Please notify us immediately if/when any of the following information changes

PROPERTY ADDRESS: _____ **DATE:** _____

OCCUPANT INFORMATION

Business License Name: _____	
Doing Business As (DBA): _____	Phone Number: _____
Suite Number: _____	Fax Number: _____
Business Square Footage: _____	Email: _____
Knox Box: ☐ YES ☐ NO	Location: _____
Fire Alarm: ☐ YES ☐ NO	Alarm Monitoring Company Name & Phone Number: _____
Fire Alarm Reset Code: _____	

BUSINESS OWNER INFORMATION

Business Owner Name: _____	Phone Number: _____
Mailing Address: _____	Cell Number: _____
City, State, Zip Code: _____	
Email Address: _____	

BUSINESS BILLING/CORRESPONDENCE INFORMATION (Complete if different from above)

Billing Name: _____	Phone Number: _____
Mailing Address: _____	Fax Number: _____
City, State, Zip Code: _____	
Email Address: _____	

EMERGENCY CONTACT INFORMATION

INDIVIDUALS WHO CAN GIVE EMERGENCY PERSONNEL ACCESS TO THE FACILITY
Additional emergency contacts may be listed on the reverse side, if desired.

1. Name: _____	Home Phone Number: _____
Address: _____	Work Phone Number: _____
City, State, Zip: _____	Cell Phone Number: _____
Email Address: _____	Key: ☐ YES ☐ NO
Relation to Business: _____	
2. Name: _____	Home Phone Number: _____
Address: _____	Work Phone Number: _____
City, State, Zip: _____	Cell Phone Number: _____
Email Address: _____	Key: ☐ YES ☐ NO
Relation to Business: _____	
3. Name: _____	Home Phone Number: _____
Address: _____	Work Phone Number: _____
City, State, Zip: _____	Cell Phone Number: _____
Email Address: _____	Key: ☐ YES ☐ NO
Relation to Business: _____	

Digital Forms are located at www.chambersburgfire.com/forms-applications/

Please fill this form out and mail or email to:

Chambersburg Fire Department 130 North Second Street, Chambersburg, Pa 17201

Email Address: Fireadmin@chambersburgpa.gov