

## NORTH MIAMI BEACH POLICE DEPARTMENT 16901 NE 19 Avenue North Miami Beach, FL 33162 (305) 949-5500



Form 513A

## **Business Emergency Contact Information**

The City of North Miami Beach Police Department requests that you complete this form in the event of an emergency occurring upon your premises during non-business hours. Pursuant to City Ordinance Section 12-1.3 (a) (b) (c) all owners of businesses, professions, or other occupations within the City shall, upon the initial issuance of their City business tax receipt, file emergency contact information cards with the Police Department. Information changing during the year shall be updated by notification of the Police Department. Please return this form with your Business Tax Application. Thank you.

## PLEASE PRINT LEGIBLY

Date:				
Business Name:		р	laza or Rldg Name:	
Location:			laza of blug Name.	
Business Phone:				
E-mail Address:			.,, p.c.	
	Er	nergency Co	ntacts	
Manager's Name:			Title:	
Address:				
Phone:	Cell:			
E-mail Address:				
Alternate 1:			Title:	
Address:				
Phone:	Cell:			
E-mail Address:				
Alternate 2:			Title:	
Address:				
Phone:	Cell			
E-mail Address:				
	Pro	emises Infor	mation	
(Circle all that apply)				
Gated	Security Dog	Hazardous	Materials	Lights on at Night
Alarm Type: (circle one)	Audible	Silent	No Alarm	
Alarm Company:			Phone:	
External Security:	Cameras	CCTVs	Other (please	specify)
(For Police Use Only)	7ana.			