

## City of London Residential Public Safety Database

This form's purpose is to add pertinent information to the City of London's public safety database in case an emergency response is requested at your residence. Complete as much pertinent information as you desire to assist first responders in the case of an emergency such as burglary, fire, natural disaster or medical incident. The information will not be disseminated outside the intended use of public safety first responders. The form may be emailed to [lpdrecords@lpdoh.com](mailto:lpdrecords@lpdoh.com) or sent to 10 E 1<sup>st</sup> St., London, OH 43140. Phone 740-852-1414.

**Residence Address:** \_\_\_\_\_  
(Please ensure address is visible on residence)

**Alarm Company:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Residence Phone:** \_\_\_\_\_ **(landline) Email** \_\_\_\_\_

**Resident Name:** \_\_\_\_\_ **Age** \_\_\_\_\_ **Cell:** \_\_\_\_\_

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**Resident Name:** \_\_\_\_\_ **Age** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**Please list & describe any special needs, disabilities or medical considerations for first responders:**

**List any other information for the location you feel may help first responders in an emergency:**

**Emergency Contact:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

I hereby release the above information to be utilized in a public safety database in the case of an emergency.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date