EMERGENCY CONTACT INFORMATION SHEET

The following information is requested from all residences in Bath for use by the Bath Police and Fire Departments. The below information will enable Bath Township’s Emergency Services to serve you the best way possible. All information (i.e. unlisted phone numbers, etc...) will be kept confidential.

NAME: ____________________________________________________________

ADDRESS: _________________________________________________________

TELEPHONE NUMBER(S): ____________________________ FAX NO.

EMPLOYER: _________________________________________________________

ADDRESS: _________________________________________________________ PHONE: ______________________

IS YOUR PHONE NUMBER UNLISTED? YES _____ NO _____

ADDITIONAL PEOPLE TO CONTACT IF UNABLE TO REACH OWNER

<table>
<thead>
<tr>
<th>NAME</th>
<th>ADDRESS</th>
<th>PHONE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

ALARM COMPANY: ______________________________________________________

PHONE: ____________________________________________________________

Please provide any additional information you think would assist the Bath Emergency Services in

______________________________________________________________

______________________________________________________________

______________________________________________________________

______________________________________________________________

______________________________________________________________

______________________________________________________________

COMPLETED BY: _______________________________ DATE: ________________