



**East Dundee Fire Protection District**  
**Fire Prevention Bureau**  
 401 Dundee Avenue  
 East Dundee, IL 60118  
 847-426-7521 x410  
[fireprevention@edfire.com](mailto:fireprevention@edfire.com)



**EMERGENCY CONTACT FORM**

Date: \_\_\_\_\_

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

Address: \_\_\_\_\_ Suite/Unit: \_\_\_\_\_

City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

Phone number: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

***Business Hours:***

Mon-Fri: \_\_\_\_\_ thru \_\_\_\_\_ Sat: \_\_\_\_\_ thru \_\_\_\_\_ Sun: \_\_\_\_\_ thru \_\_\_\_\_

***\*PLEASE LIST KEYHOLDERS AND PHONE NUMBERS THAT CAN BE REACHED AFTER NORMAL BUSINESS HOURS IN THE EVENT OF AN EMERGENCY\****

***1st to be called:***

Name: \_\_\_\_\_ Home: \_\_\_\_\_

Email: \_\_\_\_\_ Cell: \_\_\_\_\_

Key Holder       Manager       Business Owner       Building Owner

***2nd to be called:***

Name: \_\_\_\_\_ Home: \_\_\_\_\_

Email: \_\_\_\_\_ Cell: \_\_\_\_\_

Key Holder       Manager       Business Owner       Building Owner

***3rd to be called:***

Name: \_\_\_\_\_ Home: \_\_\_\_\_

Email: \_\_\_\_\_ Cell: \_\_\_\_\_

Key Holder       Manager       Business Owner       Building Owner

***Business Owner Information***

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

Address: \_\_\_\_\_ Suite/Unit: \_\_\_\_\_

City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

***Property Owner Information***

Same as Business Owner

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

Address: \_\_\_\_\_ Suite/Unit: \_\_\_\_\_

City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_