



**De Soto Police Department**  
405 Walnut Street  
De Soto, Iowa 50069

**COMMERCIAL BUSINESS EMERGENCY CONTACT INFORMATION**  
**CONFIDENTIAL**

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

**Owner Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Business Phone Number:** \_\_\_\_\_

**Do you have an alarm system in place?**     Yes     No

**Do you want to be contacted in the event of an open door found at your business?**     Yes     No

**Please list who should be notified first in case of an emergency:**

<u>Name:</u>	<u>Address:</u>	<u>Phone Number:</u>
1) _____	_____	_____
2) _____	_____	_____
3) _____	_____	_____
4) _____	_____	_____
5) _____	_____	_____
6) _____	_____	_____

**Please add any narrative:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Updated:** \_\_\_\_\_

The information provided will only be provided to the Dallas County Sheriff Communications Center, and will only be used for emergency situations. All information on this form is considered confidential and not for public release.