



WILMINGTON POLICE DEPARTMENT

Box 217, 2 E. Main Street
Wilmington, VT 05363
802-464-8593

BUSINESS INFORMATION FORM

Business Name: _____

Physical Address: _____

Mailing Address (if different): _____

Telephone Number: _____ Fax Number: _____

Hours of Operation: M-F _____ Weekends _____

Owner's Name: _____

Owner's Physical Address: _____

Mailing Address (if different): _____

Telephone Number: _____ Work Number: _____

Caretaker's Name: _____

Telephone Number: _____ Work Number: _____

Emergency Contact: _____

Telephone Number: _____ Work Number: _____

Location of Entrances/Exits: 1. _____

2. _____

3. _____

4. _____

Burglary Alarm: Yes _____ No _____ Alarm Company: _____

Additional Information: