

## Ramsey County Sheriff's Office

**Crime Prevention** Bob Fletcher, Sheriff

**Public Safety Services Division – Crime Prevention Unit** 

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## Please complete & return Business Contact Information Date\_\_\_\_\_ via mail. fax. or email. Please complete the following contact information: Business Name: \_\_\_\_\_ Address: City: \_\_\_\_\_ Zip: \_\_\_\_\_ # Employees: \_\_\_\_\_ Email: Phone1: \_\_\_\_\_ Type: Main Dept: \_\_\_\_\_ Phone2: \_\_\_\_\_ Type: Main Dept: \_\_\_\_\_ Owner/Manager: Phone: \_\_\_\_\_ Email: \_\_\_\_\_ Business Type: Special Info: **Key Holder / After Hours / Emergency contact information:** Primary: \_\_\_\_\_ Secondary: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Cell Phone:\_\_\_\_\_ Alarm & Security System Information: Alarm: No Yes Company \_\_\_\_\_ Dispatch Phone# \_\_\_\_\_ Video: ☐ No ☐ Yes covers: ☐ Internal areas ☐ External areas Notes: \_\_ **Crime / Loss Prevention Training** Do you provide staff with crime prevention information and training? \( \subseteq \text{ Yes} \)

## Thank you for working for safer communities!

Add your email to receive Sheriff's Office Crime Prevention information and newsletters? 

Yes 

No

Concerns / comments (use back side too):