



NORTHVALE POLICE DEPARTMENT

116 Paris Avenue • Northvale, New Jersey 07647

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BUSINESS CENSUS FORM

(Please Print Clearly of Type)

Business		
Name of Business:		
Address:		
Business Phone Numbers: MAIN:	CELL:	FAX:
Business Owner's Name:		
Address:		
Owner's Contact Numbers: HOME:	CELL:	OTHER/FAX:
Type of Business:		
E-MAIL:		WEBSITE:
Number of Employees	Hazardous Materials on Site YES <input type="checkbox"/> NO <input type="checkbox"/>	Weapons on Site YES <input type="checkbox"/> NO <input type="checkbox"/>
Alarm Company		
Alarm Company Name:		
Address:		
Alarm Company Phone Numbers: MAIN:	FAX:	
Type of Alarm <input type="checkbox"/> BURGLAR <input type="checkbox"/> FIRE <input type="checkbox"/> PANIC/HOLDUP <input type="checkbox"/> OTHER		
Location of Alarm Panel:		
Emergency Contact Numbers		
Name Contact #1:	Home:	Cell:
Name Contact #2	Home:	Cell:
Name Contact #3	Home:	Cell:
Name Contact #4	Home:	Cell:

Effective Date: _____