

**BUSINESS REGISTRATION
APPLICATION
TOWNSHIP OF MOUNT HOLLY**

OFFICIAL USE ONLY
Registration No: _____

EMERGENCY CONTACT PAGE

OWNER(S) OR PRINCIPLE OFFICERS CONTACT INFORMATION

OWNER 1 NAME: _____ TELEPHONE: _____

ADDRESS: _____
Street/PO Box No. City State Zip Code

ALTERNATE TELEPHONE: _____ EMAIL ADDRESS: _____

OWNER 2 NAME: _____ TELEPHONE: _____

ADDRESS: _____
Street/PO Box No. City State Zip Code

ALTERNATE TELEPHONE: _____ EMAIL ADDRESS: _____

EMERGENCY CONTACTS (AT LEAST ONE MUST BE DIFFERENT THAN ABOVE)

PRIMARY CONTACT: _____ TELEPHONE: _____

ALTERNATE TELEPHONE: _____ EMAIL ADDRESS: _____

SECONDARY CONTACT: _____ TELEPHONE: _____

ALTERNATE TELEPHONE: _____ EMAIL ADDRESS: _____

ALARMS (CHECK ALL THAT APPLY)

BURGLAR

FIRE

EMERGENCY CONSIDERATIONS

Please provide additional information regarding hazardous materials on site or other information that will aid emergency personnel in their response. Please attach additional pages as necessary.

PERSONAL INFORMATION PROVIDED IN THIS APPLICATION WILL NOT BE DISTRIBUTED. INFORMATION WILL BE DISTRIBUTED AS NECESSARY TO PARTIES INCLUDED ON THIS FORM VIA EMAIL AND THE POSTAL SERVICE FOR PUBLIC SAFETY AND EMERGENCY PREPAREDNESS PURPOSES AS WELL AS PUBLIC SERVICE ANNOUNCEMENTS.