

****THIS FORM MUST BE COMPLETED TO OBTAIN YOUR BUSINESS LICENSE****



M.A.R.C.

Merchant Awareness Reduces Crime

Forest Park Police Department is making its “**marc**” in the community

Please print, read and fill out this form completely.

Date: _____ **Type of Business:** _____

Business Name: _____ **Phone#:** _____

Address: _____ **Suite#:** _____

Email address (if available): _____

Work Phone#: _____ **Work Fax#:** _____

Owner Name: _____ **Owner's Home Phone#:** _____

Owner's Home Address: _____

Circle Alarm Type(s): Burglar Fire Panic Hold up Etc _____

Alarm Company: _____ Phone#: _____

Do you have any security concerns? If so, please explain:

Have you noticed any problems in the area of your business? If so, what are they:

What can we the police do to help maintain a safe working environment?

Emergency contact person: _____ Phone#: _____ Cell#: _____

Back-up person: _____ Phone#: _____ Cell#: _____

Back-up person: _____ Phone#: _____ Cell#: _____

Back-up person: _____ Phone#: _____ Cell#: _____

CITY HALL PERSONNEL: Please route this completed form to the police department upon license approval.

COMMUNICATIONS USE ONLY:

Keyword: _____

Rolodex date: _____

CAD Date: _____

06/2014

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