



Spearfish Police Department

625 5th St
Spearfish, South Dakota 57783-2311
605-642-1305

Pat Rotert, Chief of Police Dana Boke, Mayor



Dear Business Owner or Manager,

Please help ensure that the Spearfish Public Safety Dispatch Center has accurate and current contact information for your business. In the event of an emergency, this information helps us quickly contact you or your designated employee. This information will not be released to anyone outside of our agency.

Please complete the fill in the blank form, and then submit it by clicking on the submit button. By doing so, you provide us with accurate emergency information concerning your business. If you have any questions regarding this form, please call the Spearfish Police Department, Public Safety Dispatch Center, at 605-642-1300.

Thank you,

Patrick J. Rotert

**Chief of Police
Spearfish Police Department**

Celebrating
125
YEARS

**SPEARFISH PUBLIC SAFETY DISPATCH CENTER
BUSINESS FILE UPDATE**

Date _____

Name of Business _____

Address of Business _____

Mailing Address if different _____

Business Phone Number _____ Fax _____

Alternative Business Phone Number _____

Business E-mail (please print clearly) _____

(If e-mail is provided we will attempt to contact you next year via e-mail, the e-mail will come from officers.name@cityofspearfish.com)

Contact Person: *please mark X who should be the primary contact*

[] Owner Name _____ Home Phone _____

Cell Phone _____

[] Manager Name _____ Home Phone _____

Cell Phone _____

[] Key Holder _____ Home Phone _____

Cell Phone _____

[] Key Holder _____ Home Phone _____

Cell Phone _____

[] Key Holder _____ Home Phone _____

Cell Phone _____

[] Building Owner _____ Home Phone _____

Cell Phone _____

Alarm Company _____ Phone Number _____

Please circle:

Knox Box: Yes \ No, Dog on Premises: Yes \ No, Seasonal: Yes \ No

AED On Location: Yes \ No...If Yes Location _____

(Automatic External Defibrillator)

Hours of Operation: Open 24 hours a day: Yes \ No

Monday ____ - ____, Tuesday ____ - ____, Wednesday ____ - ____, Thursday ____ - ____, Friday ____ - ____,

Saturday ____ - ____, Sunday ____ - ____,

Hazardous Material: Yes \ No...If yes please provide **Hazmat Type, Quantity, and Location:**

Thank you for providing us with this information. We will ask you to provide us with this information annually to ensure we have accurate and current records. We will, in no manner, release this information to anyone outside of our department. If you have any questions, please call the Spearfish Police Department at 642-1300.