

Lowell Police Department

Emergency/After Hours Contact Information

Business Name _____

Business Address _____

Business Phone Number _____

After hours emergency contact name and phone number:

1. _____ () _____

2. _____ () _____

3. _____ () _____

Alarm Company Name: _____

Alarm Company Phone Number: _____

*Information provided will only be used by city officials in the case of an emergency.