

**CRAMERTON POLICE DEPARTMENT  
BUSINESS REGISTRATION**

New Registration                       Updated Registration

Date: \_\_\_\_\_ Registration Number: \_\_\_\_\_

Business Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_

Mailing Address: [  Same as Above ] \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Business Hours: \_\_\_\_\_ Telephone: \_\_\_\_\_

Security Lighting:    Front    Sides    Rear    Interior (After Closing)

Alarm Status:    Burglar    Silent    Fire   Sprinkler:    Yes    No

Alarm Company: \_\_\_\_\_ Telephone No.: \_\_\_\_\_

Hazardous Materials:    Animals    Gas    Oils    Chemicals    Weapons  
 Ammunition    Flammables    Stored Vehicles  
 Other: \_\_\_\_\_

	Contact Person	Title	Telephone 1	Telephone 2
1				
2				
3				
4				

Special Instructions: