



A. Scott Porter  
Chief of Police

# LONGPORT POLICE DEPARTMENT

2305 Atlantic Avenue • Longport, New Jersey 08403-1196

609-822-2141 • Fax 609-822-0682

## RESIDENT INFORMATION SHEET (please print)

RESIDENT NAME: \_\_\_\_\_

### LOCAL INFO

### OUT OF TOWN INFO

Address \_\_\_\_\_

address \_\_\_\_\_

City,State,Zip: Longport, NJ 08403

City,State,Zip \_\_\_\_\_

phone number: \_\_\_\_\_

phone number \_\_\_\_\_

**EMERGENCY CONTACT** (Should the Police Dept have the need to contact someone in regards to your property and you cannot be reached)

Name: \_\_\_\_\_ phone number: \_\_\_\_\_

Address: \_\_\_\_\_

### ALARM COMPANY INFORMATION:

Name of Alarm Company: \_\_\_\_\_ phone number \_\_\_\_\_

### PET INFORMATION (to assist with lost pets)

Type of pet \_\_\_\_\_ Breed \_\_\_\_\_ markings \_\_\_\_\_ permit # \_\_\_\_\_

### FIREARM INFORMATION

Type: \_\_\_\_\_ Make \_\_\_\_\_

Serial # \_\_\_\_\_ Permit # \_\_\_\_\_

MEDICAL INFO (any special needs that the Police Dept should be made aware of in the event of power outages, inclement weather, etc.)

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Thank you for taking the time to fill out this form. This information will be placed into the police department in house computer and will not be divulge to any outside source.

***EITHER MAIL TO ABOVE ADDRESS OR TURN INTO THE POLICE DEPT***