

City of Fenton REVERSE 911 Community Notification System

CELLULAR , VOICE OVER INTERNET (VoIP) & UNLISTED PHONE NUMBER ENROLLMENT

Please submit your completed form to:

Fenton Police Department
Attention: REVERSE 911
311 S. Leroy Street
Fenton, MI 48430

___ PLEASE **ADD** MY INFORMATION ___ PLEASE **DELETE** MY INFORMATION

CONTACT NAME: _____ RESIDENCE BUSINESS
(Please circle one)

STREET NO: _____ STREET NAME: _____ APT #: _____

CITY: (Location MUST be in the City of Fenton ONLY)

PHONE #1 PHONE #2 PHONE #3
Enter up to three (3) phone numbers per phone type with no dashes (i.e.
81055501212) _____

RESIDENTIAL _____

BUSINESS: _____

CELLULAR: _____

TTY/TDD: _____

REMINDER: IT IS NOT NECESSARY TO SUBMIT ANY CURRENTLY PUBLISHED LAND-LINE PHONE NUMBERS.

By submitting this REVERSE 911 form to Fenton City 9-1-1, I am specifically giving Fenton City 9-1-1 permission to use my telephone numbers to provide me with significant information pertinent to myself, my family, and/or my residence or business located in the City of Fenton.

Signature: _____ Date: _____