Berlin Police Department
240 KENSINGTON ROAD
BERLIN, CT 06037-2647
Phone (860) 828-7080
Fax (860) 828-7590

Key Keeper Program Request Form

The Berlin Police Department Community Relations Division invites you to become a part of our Key Keeper Program.

Please fill in the information requested below and return to the Berlin Police Department.

_____

Print Last Name First Name Phone Email

Address: _____

Emergency Contact: _____ Phone: _____ Email: _____

Address: _____

Alarm System/Name: _____ Phone: _____

Pets in Home: Yes No If yes, breed(s): _____
(circle one)

Medical Condition(s):_____

Would you like to receive a Special Needs Registry application? Yes No
(circle one)

Vehicle(s): Make/Model/License Plate #: _____

Special Information: _____

_____

In the event of an emergency, when family, friends or neighbors cannot be reached, I authorize the Berlin Police Department to enter my residence to assist and/or check on me. They may keep on file the above information, along with my house and/or car keys.

_____

Signed **Date**

Please note that the Berlin Police Department will contact you via E-Mail once a year to verify participation with the program and to update any pertinent information.