



Jeff Diederich

SHERIFF OF WILLIAMSON COUNTY



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BUSINESS KEYHOLDER INFORMATION

Dear Business Owner,

The Williamson County Sheriff's Office would appreciate your help in updating our records with your contact and key holder information. Please fill out these sheets and return this form to The Williamson County Sheriff's Office via mail, fax or email. If you have any questions please feel free to call us. The information from forms are kept in utmost confidence.

Thank You,
Sheriff Jeff Diederich

Date of Information: _____

Business Name: _____ **Phone :** (____) ____ - ____

D.B.A: _____

Address: _____

(Address)

(City, State, Zip)

Business Owner (if applicable):

Name: _____

Address: _____

City: _____

State: ____ **Zip:** _____

Phone: _____

Property Owner (if known):

Name: _____

Address: _____

City: _____

State: ____ **Zip:** _____

Phone: _____

Key holder List: *(Will be called in order)*

1st Keyholder: Name: _____ **Phone:** _____

2nd Keyholder: Name: _____ **Phone:** _____

3rd Keyholder: Name: _____ **Phone:** _____

Does your business or property have any of the following *(Please Check all that apply)*

Law Enforcement

Surveillance/Security Video Security Guards

Is Building Alarmed Yes No

Alarm Company: _____

Alarm Company Phone Number: _____

Location of Alarm Panel: _____

Fire Service

Fire Alarm System Knox Box

Location of Alarm Panel: _____ Location of Knox Box _____

Fire Department Connections Gas Shut Off Location: _____

Location of FDC: _____ Fuse Box Location: _____

Sprinkler System Elevators

Please list any specific hazards *(such as the location of stored flammable liquids, etc.)*

Person Completing Form: _____ **Telephone:** _____