



## Lancaster County-Wide Communications Location Safety Alert / Critical Property Information Update Form

**Check the information type you are submitting for the address.**  
 (Note: If submitting information about an individual with a medical condition, use the PA Premise Alert form)

Responder Safety Alert       Critical Property Information

<b>Residence or Business Name:</b>	
<b>Address:</b>	
<b>Municipality:</b>	

Use this space to fill in as much information as possible about the responder safety issue or property information.  
 Form must be typed. No handwritten submissions.

*Information included on this form is the responsibility and liability of the submitting agency. Information will need to be verified, at a minimum annually or when the status at the location changes, by the submitting agency or the alert will be removed from CAD after one year. Information must be submitted by a chief officer (FD), Sergeant or higher (PD), or EMS Supervisor (EMS).*

When completed, email this form to [SupportServices@lcwc911.us](mailto:SupportServices@lcwc911.us), or fax it to (717)664-1128 for entry into CAD.  
 This form may be reproduced.

<b>Submitted By:</b> (Print)		<b>Contact #:</b>	
<b>Agency / Rank:</b>		<b>Date:</b>	

<b>Reporting Person's Signature:</b>	
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**LCWC Use Only:**

<b>Received By:</b>		<b>Date Entered:</b>	
<b>Expiration Date:</b>		<b>Dates Renewed: (Valid for one year after renewal date)</b>	
<b>Notify Local PD</b>	Emailed To:		
<b>Notify Local FD</b>	Emailed To:		
<b>Notify Local EMS</b>	Emailed To:		

**Make a copy for each service and place in their department file.**