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CITY OF
MAPLE GROVE FIRE-RESCUE DEPARTMENT Contact Information
12800 Arbor Lakes Parkway, PO Box 1180, Maple Grove, MN 55311-6180 Phone 763-494-6090 Fax 763-494-6421

Please fill out this form completely, print a copy for your records by clicking the button on either the top or bottom of the page, then e-mail back to the Maple Grove Fire Department by clicking the button at the top or bottom of the page.

*****Do not save or use the submit button within your application, only the submit button on this form*****

Business Name: Phone: Fax:
Contact/Responsible Person: E-mail Address:
Business Address Number: Business Street Name:
Business Suite Number: Business Zip Code: Select One

Business Owner: Phone: Fax:
Contact/Responsible Person: E-mail Address:
Business Owner Address:

Building Name:
Building Address Numbers: Building Street Name:
(Complete Low to High Address)
Building Low to High Suite Designation: Building Zip Code Select One
Building Owner (Legal): Phone: Fax:
Contact/Responsible Person: E-mail Address:
Building Owner Address:

Building Property Management: Phone: Fax:
Contact Person/Responsible Person: E-mail Address:
Management Co. Address:

Emergency Call List

These contact persons are necessary if the fire or police departments need to contact you outside of your regular business hours in the event of an emergency. (Provide a minimum of 2)

Contact #1 Name : Select One Please
Contact #2 Name : Select One Please
Contact #3 Name : Select One Please

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Thank You for completing this form!

Date Submitted:

Submit by Email