

# Village of Wappingers Falls Police Department

## Emergency Watch Program

Please Complete and mail this form to:  
 Village of Wappingers Falls Police Department  
 Attn: Police Commissioner  
 2628 South Ave, Wappingers Falls, NY 12590

<b>Date:</b>
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### Resident Information

<b>Name:</b>		
<b>Street Address:</b>		
<b>City</b>	<b>State</b>	<b>Zip code</b>
<b>Home Phone Number</b>	<b>Cell Phone Number</b>	
<b>Pets</b> ___ Yes ___ No <b>Type and Location:</b>		
<b>Resident is able to walk</b> ___ Yes ___ No <b>List physical impairments:</b>		
<b>Resident lives alone</b> ___ Yes ___ No <b>If no, list names of Co-Residents:</b> _____		
<b>Medical Conditions:</b>		
<b>Doctor's Name</b>		<b>Doctor's Phone Number</b>

### Primary Contact Person

<b>Name</b>	<b>Relationship</b>	
<b>Street Address</b>		
<b>City</b>	<b>State</b>	<b>Zip Code</b>
<b>Home Phone</b>	<b>Cell Phone</b>	<b>Work Phone</b>
<b>Key Holder</b> ___ Yes ___ No		

### Alternate Contact Person

<b>Name</b>	<b>Relationship</b>	
<b>Street Address</b>		
<b>City</b>	<b>State</b>	<b>Zip Code</b>
<b>Home Phone</b>	<b>Cell Phone</b>	<b>Work Phone</b>
<b>Key Holder</b> ___ Yes ___ No		

If you have any question, please call the Village of Wappingers Falls Police Commissioner at 845-297-1011