

Town of Bellingham Fire Department

Business Information

Business Name	
Address (include unit # if applicable)	
Phone Number	

Business Owner Information

Name	
Address	
Phone Number	

Property Owner Information

Name	
Address	
Phone Number	

Emergency Contacts

Closest Contact(to facility)	
Home Address	
Phone Number	

Alternative Contact	
Home Address	
Phone Number	

Alternative Contact	
Home Address	
Phone Number	

**Please complete the form, scan and email to
fireprevention@bellinghamma.org**