Town of Mounds Storm Shelter Registration

Name:				
Physical A	Address:			
City:		State:	_Zip:	
Email:			•	
Primary T	el: ()	Other Tel: ()	
Emergend	cy contact:	Tel: ()	
Type of Si	<u>helter</u>			
[] Above	e ground			
[] Below	ground			
Location (of Shelter			
[] Garag	ge			
[] Baser	ment			
[] Stairv	vell			
[] Yard				
[] Close	t			
[]Other	· Inlease describ	ne hriefly)		

Form are on file at the town hall and used for emergency purposes only. Residents are responsible for updating any changes to this form.

Physical Address:	
Primary Tel: ()	
Emergency contact:	
Type of Shelter	
[] Below ground	
[] Basament	
teaot0 []	

Form are on file at the town half and used for emergency purposes only. Residents are responsible for applicing any changes to this form.