



**NOBLESVILLE POLICE DEPARTMENT  
BUSINESS WATCH**

**Application**

Business Name: \_\_\_\_\_ Business Phone #: (\_\_\_\_) \_\_\_\_\_

Business Address: \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

Owners Name: \_\_\_\_\_ Sex:  Male  Female  
(Last) (First) (Middle)

Owner's Cell Phone #: (\_\_\_\_) \_\_\_\_\_

After-Hours Contact Name #1: \_\_\_\_\_

Contact #1 Cell Phone #: (\_\_\_\_) \_\_\_\_\_ Alt Phone #: (\_\_\_\_) \_\_\_\_\_

After-Hours Contact Name #2: \_\_\_\_\_

Contact #2 Cell Phone #: (\_\_\_\_) \_\_\_\_\_ Alt Phone #: (\_\_\_\_) \_\_\_\_\_

Does your business have video surveillance?  Yes  No

Number of Cameras in System: \_\_\_\_\_ Where Located? Inside  Outside  Both

How Many Days are Recordings Stored? \_\_\_\_\_



**NOBLESVILLE POLICE DEPARTMENT**

317.776.6340 | 135 South 9th Street | Noblesville, IN 46060 | [www.CityofNoblesville.org](http://www.CityofNoblesville.org)

We appreciate the time you took to complete this application and we will contact you in the near future regarding this application.

Please return completed application to:

Noblesville Police Department  
Business Watch Program  
135 S 9<sup>th</sup> Street  
Noblesville, IN 46060

**For NPD Use Only:**

Date Received: \_\_\_\_\_

Training Completed: \_\_\_\_\_

Decal Issued: \_\_\_\_\_

