HASTINGS
FIRE DEPARTMENT

Date: _____

Business Name: _____

Address: _____

I understand the purpose of the Knox Box system is to provide faster emergency response without forced entry damage. Instead of purchasing and installing the required Knox Box, I hereby authorize the Hastings Fire Department personnel to gain emergency access to this facility. I accept full responsibility for any and all entry damages to structure and any and all delayed entry damages.

Signature: _____

Printed Name: _____

1313 North Hastings Avenue, Hastings NE 68901
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hfd@hastingsfire.org www.hastingsfire.org

Any Problem, Any Time, Any Where