|  |  |
| --- | --- |
| HRPS Flash 40kb | **Halton Regional Police Service**  **Critical Infrastructure Police Emergency Response (CIPER)**  **Data Sheet – Place of Worship** |

**Section 1 | Basic Location Information**

|  |  |
| --- | --- |
| **Place of Worship Name** |  |

**Location**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Street #** | **Street Name** | | **Street Direction** | | **Unit #** |
|  |  | |  | |  |
| **City/Town** | | **Municipality** | | **Postal Code** | |
|  | |  | |  | |
| **General Phone Number** | | **General Email Address** | | | |
|  | |  | | | |

**Are you the legal owner or tenant of the location?**

**Section 2 | Legal Property Owner Information**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Legal Owner’s Name:** | | | | | |
| **Street #** | **Street Name** | | **Street Direction** | | **Unit #** |
|  |  | |  | |  |
| **City/Town** | | **Municipality** | | **Postal Code** | |
|  | |  | |  | |
| **General Phone Number** | | **General Email Address** | | | |
|  | |  | | | |

**Section 3 | Emergency Contacts**

| **1. Title/Position:** | | | | | |
| --- | --- | --- | --- | --- | --- |
| **Last Name** | | **First Name** | | **Email Address** | |
|  | |  | |  | |
| Phone 1 |  | Cell | Business | | Residence |
| Phone 2 |  | Cell | Business | | Residence |
| Phone 3 |  | Cell | Business | | Residence |

| **2. Title/Position:** | | | | | |
| --- | --- | --- | --- | --- | --- |
| **Last Name** | | **First Name** | | **Email Address** | |
|  | |  | |  | |
| Phone 1 |  | Cell | Business | | Residence |
| Phone 2 |  | Cell | Business | | Residence |
| Phone 3 |  | Cell | Business | | Residence |

| **3. Title/Position:** | | | | | |
| --- | --- | --- | --- | --- | --- |
| **Last Name** | | **First Name** | | **Email Address** | |
|  | |  | |  | |
| Phone 1 |  | Cell | Business | | Residence |
| Phone 2 |  | Cell | Business | | Residence |
| Phone 3 |  | Cell | Business | | Residence |

| **4. Title/Position:** | | | | | |
| --- | --- | --- | --- | --- | --- |
| **Last Name** | | **First Name** | | **Email Address** | |
|  | |  | |  | |
| Phone 1 |  | Cell | Business | | Residence |
| Phone 2 |  | Cell | Business | | Residence |
| Phone 3 |  | Cell | Business | | Residence |

**Section 4 | Location Information**

|  |  |  |
| --- | --- | --- |
| **Number of floors above ground** | **Number of floors below ground** | **Number of Elevators** |
|  |  |  |
| **Public address system** | **On-site child care facility** | **Underground or covered parking** |
|  |  |  |

**Lock Down Procedures**

|  |  |  |  |
| --- | --- | --- | --- |
| Physical copy available? |  | Location of copy |  |

**Floor Plans**

|  |  |  |  |
| --- | --- | --- | --- |
| Physical copy available? |  | Location of copy |  |

**Site Plan**

|  |  |  |  |
| --- | --- | --- | --- |
| Physical copy available? |  | Location of copy |  |

|  |
| --- |
| **List designated evacuation points** |

**CCTV**

|  |  |
| --- | --- |
| CCTV cameras on site |  |
| Remote CCTV camera monitoring available |  |

**Security**

|  |  |
| --- | --- |
| Security staff on site |  |
| Security company name | if applicable |  |
| Security office location |  |
| Security office contact telephone number |  |
| Security staff working hours |  |

**Alarm**

|  |  |
| --- | --- |
| Remote alarm monitoring |  |
| Alarm company name | if applicable |  |
| Alarm company contact telephone number |  |

|  |
| --- |
| **Provide any additional important details regarding the location** |

|  |  |  |  |
| --- | --- | --- | --- |
| **Submitted by** | **Email address** | **Telephone number** | **Date submitted** |
|  |  |  |  |