



## Juneau County Sheriff' s Office

200 Oak Street • Mauston, WI 53948 • (608)847-5649 • Fax: (608)847-9401

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***BRENT H. OLESON, SHERIFF • ANDREW ZOBAL, UNDERSHERIFF***

The Juneau County Sheriff's Office is asking for your assistance in updating your addresses in our 911 Dispatching system. With the evolution of technology, many residents have chosen to go wireless and no longer have a dedicated land line for a home phone. We are seeking to keep our address database as current as possible and request your assistance in completing the attached form.

The information contained in the form will remain confidential and will only be used to dispatch emergency services and law enforcement to your property. The form will also allow you to provide other information that may assist us when responding to your residence, such as persons with disabilities or medical conditions. You may also designate an emergency contact for the residence in case we are unable to reach you, or you live alone. If you own a seasonal property and live outside the area, you could provide us with a local contact who may be a caretaker for your property.

Please complete the attached form and return it to the Juneau County Sheriff's Office, Attn: 911 Data, 200 Oak Street, Mauston, WI 53948. If you have any questions about completing this form please call (608) 847-5649.

Thank you for your assistance!

Brent H. Oleson  
Juneau County Sheriff

PLEASE MAIL OR DROP THIS FORM OFF AT THE ADDRESS BELOW:

JUNEAU COUNTY 911 DATA INPUT  
JUNEAU COUNTY SHERIFF'S DEPARTMENT  
200 OAK STREET  
MAUSTON, WI 53948

NAME: \_\_\_\_\_ DOB \_\_\_\_\_ PHONE \_\_\_\_\_  
(FIRST) (MI) (LAST)

ADDITIONAL OCCUPANTS:

NAME: \_\_\_\_\_ DOB \_\_\_\_\_ PHONE \_\_\_\_\_

NAME: \_\_\_\_\_ DOB \_\_\_\_\_ PHONE \_\_\_\_\_

NAME: \_\_\_\_\_ DOB \_\_\_\_\_ PHONE \_\_\_\_\_

NAME: \_\_\_\_\_ DOB \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS: \_\_\_\_\_ APT/LOT # \_\_\_\_\_

CITY/VILLAGE/TOWNSHIP: \_\_\_\_\_ ZIP: \_\_\_\_\_

IS THIS A BUSINESS OR RESIDENCE? (CIRCLE ONE)

DO YOU OWN THIS PROPERTY OR RENT? (CIRCLE ONE)

IF YOU OWN THIS PROPERTY, DO YOU RESIDE AT THIS RESIDENCE? (YES/NO) OR ARE YOU THE LANDLORD (YES/NO)?

IF YOU ARE THE LANDLORD, PLEASE PROVIDE YOUR HOME ADDRESS AND CONTACT INFORMATION:

MARK (X) FOR ANY SPECIAL CONDITIONS THAT EXIST AT YOUR LOCATION:

\_\_\_\_\_ HANDICAPPED OR BEDRIDDEN PERSON      \_\_\_\_\_ CHILDREN  
\_\_\_\_\_ SENIOR CITIZENS      \_\_\_\_\_ PETS  
\_\_\_\_\_ HEALTH CONDITIONS      \_\_\_\_\_ SEASONAL RESIDENCE

OTHER INFORMATION WHICH WOULD PERMIT POLICE, FIRE OR AMBULANCE TO MORE READILY ASSIST YOU IN AN EMERGENCY:

EMERGENCY CONTACT: \_\_\_\_\_  
(NAME) (RELATIONSHIP) (PHONE)

NOTE: This information is confidential and strictly used for the purpose of dispatching emergency providers, including law enforcement.