



*You may qualify for a free Knox Box and installation through the West Bend Fire Department's Residential Knox Box Program. (Quantities limited.)*



A *Knox Box* is a secure container system used mainly for storing building keys.

In cases of emergency, the Fire Department can access the box with a master key. Once the *Knox Box* is installed at the entrance to your building, the Fire Department will lock your entrance key inside the *Knox Box* so that it is available on-site for future emergencies.

#### What are the benefits?

- Independent senior citizens and disabled residents receive quick access by the Fire Department for fire and medical emergencies. A *Red Cross File of Life* medical information sheet stored in the box provides medical history information.
- Provides rapid access without causing unnecessary forcible-entry damage to the residence.
- Enhances the West Bend Fire Department's ability to protect the health and safety of the public, as well as that of fire-fighting personnel.
- A home safety inspection is conducted including a check of smoke detector operation.

#### Eligibility

To be eligible for this program, an applicant must:

- Reside in West Bend Fire Department's jurisdictional area
- Live in a one or two-family residential building
- Be age 55 or older **or** have a medical disability

**To apply for a free residential *Knox Box*, complete the application on the back of this form and mail or fax to:**

Residential *Knox Box* Program  
 West Bend Fire Department  
 325 North 8th Avenue  
 West Bend, Wisconsin 53095  
 Fax: 262.335.5148  
 Phone: 262.335.5055





# Residential Knox Box Program Residential Knox Box Application

## Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Last First M.I.

Address: \_\_\_\_\_  
Street Address Apartment/Unit #

\_\_\_\_\_ City State ZIP Code

Phone: ( ) \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Reason for Request: \_\_\_\_\_  
 New Box  Remove Box

## Referring Agency Information

Referring Agency: \_\_\_\_\_

Agency Contact: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ E-mail Address: \_\_\_\_\_

**Mail or Fax application to:**

Residential Knox Box Program  
 c/o West Bend Fire Department  
 325 North 8<sup>th</sup> Avenue, West Bend, WI 53095  
 Fax: 262-335-5148

## To be completed by Fire Department Personnel

Date Knox Box Placed: \_\_\_\_\_ WBFD ID Number: \_\_\_\_\_

Location Knox Box Placed: \_\_\_\_\_

Vial of Life Completed? YES  NO

Fire Safety Survey Completed? YES  NO

Appropriate Smoke Detectors Present? YES  NO

Company Unit & Personnel: \_\_\_\_\_

Company Officer Signature/Date \_\_\_\_\_  
*Return to Fire Prevention Bureau when completed*

## To be completed by Fire Prevention Personnel

FH Occupancy Data Updated? YES  NO

FH Inventory Record Updated? YES  NO

Public Ed Activity Completed? YES  NO

Address Flag to Dispatch? YES  NO

Company Officer Signature/Date \_\_\_\_\_  
*Scan & attach to Firehouse Occupancy File*