



**Plymouth County Sheriff's Department  
Communicator Emergency Notification System  
Authorization Form for Published / Unpublished  
Numbers**

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

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Town: \_\_\_\_\_

Home Phone: \_\_\_\_\_

I agree to provide my published and / or unpublished home telephone number for the purpose the Plymouth County Sheriff's Department Rapid Notification system. I will be responsible for updating the Plymouth County Sheriff's Department of any changes for this number or address.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

Form can be returned to: Plymouth County Sheriff's Department  
24 Long Pond Road  
Plymouth, MA. 02360  
Attention: Field Services Division