



FRANKLIN COUNTY EMERGENCY MANAGEMENT  
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## FRANKLIN COUNTY FLORIDA RE-ENTRY INFORMATION SHEET

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_ ALT PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

DRIVERS LICENSE #: \_\_\_\_\_ DRIVERS LICENSE #: \_\_\_\_\_

BUSINESS: \_\_\_\_\_ SINGLE FAMILY HOME: \_\_\_\_\_

MULTI-FAMILY COMPLEX: \_\_\_\_\_ NAME OF COMPLEX: \_\_\_\_\_

IS THIS YOUR PRIMARY RESIDENCE? YES \_\_\_ NO \_\_\_

IF NO, WHAT IS YOUR PRIMARY ADDRESS: \_\_\_\_\_

DO YOU OWN: \_\_\_ OR RENT: \_\_\_ THE PROPERTY?

IF YOU RENT THE PROPERTY, PLEASE COMPLETE THE FOLLOWING:

PROPERTY OWNER'S NAME: \_\_\_\_\_

PROPERTY OWNER'S ADDRESS: \_\_\_\_\_

PROPERTY OWNER'S PHONE #: \_\_\_\_\_ EMAIL: \_\_\_\_\_

IF YOU OWN THE PROPERTY, DO YOU HAVE INSURANCE ON THIS PROPERTY? YES \_\_\_ NO \_\_\_

### FOR OFFICE USE ONLY:

TAG #'S: \_\_\_\_\_

PARCEL #: \_\_\_\_\_

ZONE: \_\_\_\_\_

1 APALACHICOLA 2 ST GEORGE ISLAND 3 EASTPOINT 4 CARRABELLE 5 LANARK VILLAGE EAST