

**KNOX BOX APPLICATION FORM
CITY OF WOODHAVEN
FIRE DEPARTMENT**

Due to a limited annual number of available Knox Boxes, applications for a Knox Box will be approved by the Woodhaven Fire Department, determined by the applicants with the greatest need.

Name:

Address:

Phone: _____

Cell: _____

Female or Male head of household (please circle one)

White, Black/African American, Asian, Multi-Racial (please circle one)

Age of person in need:

Handicap or disabled, a brief description please:

Date of application:

Please drop-off or mail completed form to:

**C/O Chief Janet R. Sikes
Woodhaven Fire Department
23040 Hall Road
Woodhaven MI 48183**