



PADUCAH FIRE DEPARTMENT
STORM SHELTER REGISTRATION FORM

NAME: (LAST) _____ (FIRST) _____

HOME PHONE #: _____ CELL PHONE #: _____

EMAIL ADDRESS: _____

SHELTER ADDRESS: _____

SHELTER LOCATION (AS YOU ARE STANDING FACING FRONT OF HOUSE):

BACK YARD ☐ FRONT YARD ☐ SIDE YARD RIGHT ☐ SIDE YARD LEFT ☐

GARAGE ☐ IN-HOUSE SAFE ROOM ☐ BASEMENT ☐

SHELTER TYPE:

IN-GROUND ☐ SAFE ROOM ☐ BASEMENT ☐ OTHER ☐

YEAR COMPLETED: _____ NUMBER OF HOUSEHOLD MEMBERS: _____

ADDITIONAL INFORMATION YOU WOULD LIKE TO PROVIDE (special conditions, disabilities, animals):

PLEASE DROP OFF OR MAIL FORM TO:

PADUCAH FIRE DEPARTMENT

FIRE PREVENTION DIVISION

301 WASHINGTON STREET

PADUCAH, KY 42003