## **Emergency Fax** 0355 632 224

I cannot hear  Who is sending		l cannot speak		l am disabled
		Vour Fa	v Number:	
Name: Your Fax Number:				
Where do you ne	•			
Street Address:		_Apt./Room No		Floor:
City or location_				<del></del>
What kind of help? Was ist geschehen?				
Fire Department	Fire	Rescue	Accident	ras ist geschenen:
Ambulance	Paramedic	Injury	Illness	
Police	Break-In/	Assault	Violencei	
Please send me addresses and weekend hours for  Doctor  Dentist  Ear, Nose and Throat Specialist  Pharmacy in my local area: City, County:				
Fax:	ax: Telephone:			
Thank you!	Your Signature:			
Please fax back!	Bitte zurückfaxen! Bitte z		zurückfaxen!	Please fax back!
We have received your emergency fax and				
is on the way to your location. Signature of Receiving Dispatcher:				