



Branchburg Township Police Department
590 Old York Road
Branchburg, NJ 08876
908-526-3830 ext. 400



OPERATION BLUE GUARDIAN APPLICATION

Last Name: _____ First Name: _____ MI: _____

Home Address: _____

City: _____ State: _____ Home Phone #: _____

Other Phone #: _____

REASON FOR APPLICATION (Check Box if Applicable):

I have a medical condition, and/or other disability/condition, that is potentially incapacitating and I live alone.

Other

DESCRIBE YOUR CONDITION/REASON FOR APPLYING:

Doctor's Name: _____ Phone #: _____

EMERGENCY CONTACT INFORMATION:

Contact #1:

Name: _____

Relationship: _____

Home Address: _____

Home Phone: _____ Cell/Other Phone: _____

Contact #2:

Name: _____

Relationship: _____

Home Address: _____

Home Phone: _____ **Cell/Other Phone:** _____

PET INFORMATION:

Dog(s)? Yes No If Yes, how many and what breeds? _____

Cat(s)? Yes No If Yes, how many? _____

LIVING WILL INFORMATION:

Do you have a living will or a Do Not Resuscitate (DNR) Order? Yes No

If Yes, where is it located? _____

*****THIS SECTION FOR INTERNAL USE ONLY - DO NOT WRITE BELOW LINE*****

LOCATION: _____

LOCK BOX CODE: _____

PLEASE RETURN COMPLETED APPLICATIONS TO:

**BRANCBURG TOWNSHIP POLICE DEPARTMENT
ATTN: OPERATION BLUE GUARDIAN PROGRAM COORDINATOR
590 OLD YORK ROAD
BRANCBURG, NJ 08876
908-526-3830 ext. 400
EMAIL: edward.edgar@branchburg.nj.us**