



**Employment and Social Services**

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[buttecounty.net/dess](http://buttecounty.net/dess)

## Alert FM Emergency Notification Receiver Request Form

Demographics	
Last Name: _____	Address: _____
First Name: _____	City: _____ State: ____ ZIP: _____
E-mail: _____	Mailing Address: _____
Phone Number: _____	City: _____ State: ____ ZIP: _____
Request	
I live in the qualified Public Safety Power Shut-Off (PSPS) area and;	
<input type="checkbox"/> Yes, I would like to OPT - IN and request an Alert FM Emergency Notification Receiver	
<input type="checkbox"/> No, I would like to OPT- OUT	
Signatory	
_____	_____
<b>Signature</b>	<b>Date</b>

Please save this document and then email to: [DESSAlertFM@buttecounty.net](mailto:DESSAlertFM@buttecounty.net)