Notification

City of Cottbus/Chóśebuz
Disaster prevention
D.p.-Lighthouse

D.p.-Lighthouse – Location: _____ **sequential No.:** _____

Date / Time	Name oft he messenger	Urgency - Please tick! -			Forwarding to:
		low (simple)	medium (immediate)	high (flash)	

Description:

Signature oft the person receiving the emergency notification: _____

- BLOCK LETTERS - / Signature