
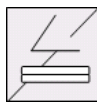















Emergency Fax
ICC - Fax-No.: 09 61 – 38 833 130

Who is sending this fax?		
Name:		Your Fax Number:
	I cannot hear <input type="checkbox"/>	
		I cannot speak <input type="checkbox"/>
		
		I am disabled <input type="checkbox"/>

Where do you need help?	
Street Address:	Apt./Room No.:
City or location:	Floor:
Additional Information:	

What kind of help do you need?				What happened?
 Ambulance	 Paramedic <input type="checkbox"/>	 Injury <input type="checkbox"/>	 Illness <input type="checkbox"/>	
 Fire Department	 Fire <input type="checkbox"/>	 Rescue <input type="checkbox"/>	 Accident <input type="checkbox"/>	
 Police	 Break in <input type="checkbox"/>	 Assault <input type="checkbox"/>	 Violence <input type="checkbox"/>	

I need other help:

<small>To be completed by the ICC:</small>
We received your emergency fax and is on the way to your location.
Name and Signature of the responsible Dispatcher:

You can find further information's about the local Doctor a Dentist Services or your next Pharmacy on our Homepage www.ils-nordoberpfalz.de at the download Service.