

**TOWN OF WOODBURY
ALARM REGISTRATION APPLICATION**

Read thoroughly before completing. Please print and answer **all** questions completely.

APPLICANT INFORMATION/ALARM LOCATION:

Resident Name (if applicable): _____
Business Name (if applicable): _____
Owner of Business (corporation or individual): _____
Full Address: _____
Phone Number: (____) _____ Fax Number: (____) _____
Cross Street/Reference Point: _____

ALARM TYPE: Central Station _____ Audible Bell/Siren _____
Make of Equipment: _____
Is your alarm for (check all that apply): _____ Fire _____ Intrusion _____ Medic Alert
The alarm system is (check one): _____ Existing _____ New and installed on ____/____/20____
Spare set of House Keys kept with: _____ Phone _____
Spare set of Alarm Keys kept with: _____ Phone _____

LIST OF CONTACT PERSONS IN CALLING ORDER TO RESPOND TO ALARM:

Name	Address	Phone
_____	_____	_____
_____	_____	_____

Installing Company _____ Phone _____
Servicing Company _____ Phone _____
Monitoring Company _____ Phone _____

AUTHORIZATION FOR ENTRY: In the event of an alarm from my premises, I hereby authorize the Police Department, Fire Department, and/or Ambulance Corps., to forcibly enter my premises for the purpose of verifying the validity of an emergency situation. I further agree to indemnify and hold harmless the Town of Woodbury, its employees, and authorized representatives from any damages to my property as a result of such forcible entry and from any other situation that ensue thereafter.

Signature of Applicant

Enclosed is my check in the amount of **\$5.00** made payable to the *Town of Woodbury*.

FOR OFFICE USE ONLY:

Woodbury Registration Number: _____ Issue Date: _____

Signature of Issuing Agent: _____