Plymouth Police Department

80 Main Street, P.O. Box 34 Terryville, CT. 06786-0034 Telephone (860)-589-7779 Fax (860)-585-4025

ALARM SYSTEM REGISTRATION

CONFIDENTIAL

Per Section 5.8-12 (D) of the Plymouth Alarm Ordinance: "All users shall register their alarm system with the Dispatch Center of the Town of Plymouth immediately upon installation....."

Registration Date:	Dat	te of Alarm Installation:	
Alarm Registrant:		Phone:	
(Bus	siness, Resident, or Occ	upant's Name)	
Alarmed Premises:			
		(Address)	
Alarm Company:		Phone:	
Alarm Company:(If	Monitored by an Ala	rm Company)	
		Phone:	
() Residentio () Residentio () Municipa	ial/Industrial	Type of Alarm System: [Check all applicable ty () Monitored by Alarm Company () Local Alarm (Neighbors Monitor) () Audible () Silent () Motion Detector () Other:	pes]
Conditions Re () Burglary () Hold-Up () Fire	eported By Alarm:	Alarm Sounds Outside Premises: () Yes () No	
() Panic () Medical F () Sprinkler		Alarm Automatically Resets: () Yes () No	
Description of Building or Sp	ecial Instructions:		
Kaubaldar Information (No	ato _ It is the verner	sibility of the alarm company to notify the pro	ne-L
owner or keyholders whenev			pert
Keyholder #1:		Phone:	
Keyholder #2:		Phone:	
Keyholder #3:		Phone:	