

Woodstock Emergency Services
454 Woodstock Road
Woodstock, VT 05091

ALARM SYSTEM REGISTRATION

Expires December 31st
Year: _____

Owner Information:

Name: _____
Alarm Physical Address: House # _____ Street Name: _____
Mailing Address: _____
Home Phone: _____ Alternate Phone: _____
Email Address: _____

Alarm Information:

Alarm Company: _____ Phone: _____
Type of Alarm: _____ Fire _____ Burglar _____ Audible _____ Panic _____ Silent _____ Lifeline
Medical Conditions: _____
Directions to the premises where the alarm system is located, including street name & 911 address number:

Property Management/Caretaker/Keyholder Information:

Name: _____ Phone(s): _____
Address: _____ Email: _____

Please provide documentation that the alarm system has been inspected and serviced by a technically qualified person in the preceding 90 days in accordance with Section 5.

A "Knox" brand lock box is required for the registration of an alarm system. Applications and information to purchase one can be picked up at Woodstock Emergency Services.

The registration fee is \$50.00 per year payable to the Town of Woodstock. Send application and check to the address at the top of this application from (on the left).

Please prepare and submit a floor plan showing location of: (use reverse side). If there is one on file, please submit any changes only.

- Oil Tank
- Electrical Panel
- Control Panel for Alarm
- LP Gas

Location of Knox box: _____

I have received, read, understand and agree to abide by the Alarm Ordinance as set forth on May 20, 2008, by the Select Board of the Town of Woodstock, VT.

Date

Signature of Property Owner or Authorized Representative