

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