

NORTH HAVEN POLICE/FIRE DEPARTMENT
 8 LINSLEY STREET NORTH HAVEN CT. 06473
 (203) 239-5321

//////////ALARM SYSTEM REGISTRATION FORM//////////

The North Haven Police Department assumes no special duty nor liability to respond to an individual alarm system. The North Haven Police Department acting in its governmental capacity for the protection of the general public, responds to alarms as the priority and the daily workload permit.

REGISTRANT _____

(name - person or firm - if person, Last name, first name

ALARMED PREMISES: _____

(Address)

ALARM COMPANY: _____

(Name and phone number)

TYPE OF PREMISES:

CONDITION REPORTED BY ALARM:

() Commercial or Industrial

() Burglary () Hold-up () Fire

() Residential

() Panic Button (medical alert)

() School

() Other: _____

() Municipal Building

() Other: _____

EXTERIOR AUDIBLE

AUTO RESET

TYPE OF ALARM SYSTEM

() Yes () No

() Yes () No

() Central Station

Reset Time : _____

() Police H.Q. Panel

() Telephone Dialer

BUILDING SPRINKLER

BUILDING CONSTR.

() Audible Monitor (inside mic)

() Yes () No

() Wood

() Proprietary (Local type)

() Steel

SIAMESE CONNECTION

() Masonry

() Yes () No

Other: _____

CONTACT PERSON IN CASE OF ACTIVATED ALARM:

1. _____
 (Name) (Address) (Phone #)

2. _____
 (Name) (Address) (Phone #)

Comments: _____

FOR OFFICIAL USE ONLY

Date of Registration: _____ Account # : _____

File Card Completed () Entered in Computer () Officer: _____

