



TOWNSHIP OF WHITEHALL

"Business & Community Working Together"



ALARM AND EMERGENCY REGISTRATION FORM WHITEHALL TOWNSHIP ORDINANCE 2029

BUREAU OF POLICE

The information you provide on the form will assist us in responding to emergencies at your residence or business establishment. Please Complete ALL applicable information and return it to the address listed below *** FEE APPLIES TO ALARM REGISTRATION ONLY.

Permits are required from the Bureau of Development for alarm installations.

WHITEHALL BUSINESS/RESIDENT NAME: _____

ADDRESS _____ PHONE: _____

EMERGENCY CONTACT PERSONS

	<u>NAME</u>	<u>ADDRESS</u>	<u>PHONE</u>	<u>TITLE</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

BUILDING OWNER'S NAME: _____

ADDRESS: _____ PHONE: _____

ALARM INFORMATION (Check appropriate boxes)

(Contact the alarm company for further information regarding the alarm system)

TYPE: Local _____ Central Station _____ Direct Line _____ Silent _____ Audible _____
Tape Dialer _____ Digital Dialer _____ Alarm Resets _____ (How Long? _____)

SPECIFIC ALARMS

Burglary _____ Fire _____ Robbery/Holdup _____ Panic/Trouble _____ Vault/Safe _____

Other (specify) _____

Do Alarm Co. or Personnel Respond? YES _____ NO _____

Entry Point for Alarm Co. or Personnel: _____

Central Station Location: _____

ALARM COMPANY NAME: _____

ADDRESS: _____

Other Information _____

FEES

\$5.00 ANNUAL REGISTRATION FEE ***** REGISTRATION FEE ENCLOSED _____

Make check payable to Whitehall Township

DATE FILED _____

SIGNATURE (Person Completing Form) _____

