



POLICE DEPARTMENT

Petersham, Massachusetts 01366

Telephone (617) 724-3330

978

ALARM BY-LAW REGISTRATION FORM

DENIS N. LEGARE

Chief of Police

FOR INTERNAL USE ONLY

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SECTION I: For Official Use Only (Do not write in the section.)

Date: _____ Registration Number: _____

SECTION II: ALARM OWNER INFORMATION

Person Filing Registration: _____

Owner of Alarm; _____

Last (or Business Name) First Middle Initial

Mailing Address: _____

Number and Street

Town State Zip Code

() ()

Home Telephone Number Business Telephone Number

()

Emergency Telephone Number

SECTION III: BILLING INFORMATION

Name or Business Name: _____

Last (or Business Name) First Middle Initial

Mailing Address: _____

Number and Street

Town State Zip Code

()

Business/Home Telephone Number

SECTION IV: ALARM USER INFORMATION (If alarm user is other than alarm owner)

Name or Business Name: _____

Last (or Business Name) First Middle Initial

Mailing Address: _____

Number and Street

Town State Zip Code

() ()

Home Telephone Number Business Telephone Number

()

Emergency Telephone Number

SECTION V: KEYHOLDER (S) (Additional persons that may be reached in an emergency.)

1. Name: _____
 Last First Middle Initial

Address: _____
 Number and Street

_____ Town State Zip Code
 () ()

_____ Home Telephone Number Business Telephone Number
 ()

_____ Emergency Telephone Number

2. Name: _____
 Last First Middle Initial

Address: _____
 Number and Street

_____ Town State Zip Code
 () ()

_____ Home Telephone Number Business Telephone Number
 ()

_____ Emergency Telephone Number

SECTION VI: ALARM INSTALLATION

Name of Person of Firm that Installed the Alarm: _____

Address: _____
 Number Street Town State

Zip Code: _____ Telephone ()

SECTION VII: ALARM DESCRIPTION

Alarm Location: _____
 (Street Address) (Floor #) (Room #)

Make of System: _____

Type of System: (Check One) () Varitech () Tape Dialer () Sonitrol
 () Central Station: _____
 () Other Describe: _____

SECTION VII: ALARM DESCRIPTION (Continuation)

Date of Installation: _____

Is this a new Installation? () Yes () No

Is this Installation? (Check One) () Industrial () Commerical
() Public () Residential

Nature of System: (Check One) () Industrial Detection
() Robbery Detection
() Fire Protection
() A Combination of the above (explain)

Explain: _____

Does this system use any of the following devices?

- () Intrusion Detectors () Motion Detectors
- () Panic Button () Exterior Bell
- () Money Lift () Interior Bell
- () Interior Horn () Exterior Horn
- () Any type audible interior or exterior (explain) _____

If an exterior audible device is used in the System, is this device automaticly restricted to a maximum of 10 minutes in duration?

- () Yes () No

SECTION VIII: AFFIRMATION

PURSUANT TO THE PROVISIONS OF THE TOWN OF PETERSHAM ALARM BY-LAW ON FILE WITH THE TOWN CLERK OF PETERSHAM AND IN CONSIDERATION OF THE PERMISSION TO USE AN ALARM DEVICE, AS DEFINED THEREIN, THE UNDERSIGNED ALARM USER AS DEFINED THEREIN ACKNOWLEDGES FULL FAMILIARITY WITH SAID BY-LAW AND CERTIFIES USER'S AUTHORIZATION TO REGISTER THE ABOVE-IDENTITIFED ALARM DEVICE. THE UNDERSIGNE FURTHER ACCEPTS FULL RESPONSIBILITY FOR SAID DEVICE AS THE ALARM USER WITHIN THE TERMS OF SAID BY-LAW AND AGREES TO FULFILL ALL REQUIREMENTS STATED THEREIN.

SECTION IX: STATEMENT OF REGISTRATION (This portion of the form must be typed by police official registering the alarm.)

THIS ALARM HAS BEEN DULY REGISTERED WITH THE PETERSHAM POLICE DEPARTMENT ON

_____, 19____
DAY MONTH DATE YEAR REG. NUMBER

BY: _____
(Type Name and Title)

Signature

Date