



**New Garden Township**  
299 Starr Road  
Landenberg, Pennsylvania 19350

**ALARM REGISTRATION APPLICATION**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Alarm Location (if different from above) \_\_\_\_\_

Type of business: \_\_\_\_\_ Any special or dangerous conditions: \_\_\_\_\_

Emergency Contact Information: *PLEASE PROVIDE THREE (3) NAMES AND PHONE NUMBERS- CONTACT PERSONS SHALL BE CAPABLE OF RESETTING ALARM OR ABLE TO CONTACT PROPERTY OWNER*

A. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

B. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

C. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Alarm Company: \_\_\_\_\_ Phone: \_\_\_\_\_

**Alarm Connection Type:** (Check all that apply)

- |   |   |
|---|---|
| <input type="checkbox"/> Local Signal – Alarm sounds at location                | <input type="checkbox"/> new registration     |
| <input type="checkbox"/> Central Station – Alarm sounds at a monitoring station | <input type="checkbox"/> Registration renewal |

**Alarm System Type:** ( check all that apply)

- |  |                                  |
|--|----------------------------------|
| <input type="checkbox"/> Burglary                              | <input type="checkbox"/> Audible |
| <input type="checkbox"/> Robbery (Panic type alarm)            | <input type="checkbox"/> Silent  |
| <input type="checkbox"/> Both Burglary & Robbery alarm systems |                                  |
| <input type="checkbox"/> Fire alarm and detection system       |                                  |

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**For Office use only**

Rec'd: \_\_\_\_\_

Date issued: \_\_\_\_\_