

Town of Bethlehem
445 Delaware Avenue
Delmar, New York 12054
(518) 439-4955 ext. 1183

No. _____

Application for Alarm Permit

APPLICANT'S NAME _____ PHONE _____ H
ADDRESS _____ PHONE _____ W
ADDRESS OF ALARMED PREMISES _____
COMMERCIAL RESIDENTIAL INDUSTRIAL INSTITUTIONAL
NON-RESIDENTIAL NAME _____ PHONE _____

Pursuant to Local Law #1 of 1987, applicant requests approval for an alarm permit at the above named location and agrees to abide by all local laws and regulations as established by the Town of Bethlehem. Alarm coverage includes:

INTRUSION (Perimeter) <input type="checkbox"/>	INTRUSION (Interior) <input type="checkbox"/>	ROBBERY <input type="checkbox"/>	PANIC <input type="checkbox"/>
MEDICAL <input type="checkbox"/>	FIRE <input type="checkbox"/>	VAULT <input type="checkbox"/>	TROUBLE <input type="checkbox"/>
OTHER (Describe) _____			
ALARMS SELLER _____	NYS# _____		
ADDRESS _____	PHONE _____		
INSTALLER _____	PHONE _____		
SERVICED BY _____	PHONE _____		
MONITORED BY _____	PHONE _____		
OUTSIDE AUDIBLE ONLY <input type="checkbox"/>			

Emergency Numbers To Call If Alarm Is Activated

NAME _____	PHONE _____	Home _____	_____
		Work _____	_____
		Cell Phone _____	_____
NAME _____	PHONE _____	Home _____	_____
		Work _____	_____
		Cell Phone _____	_____
NAME _____	PHONE _____	Home _____	_____
		Work _____	_____
		Cell Phone _____	_____

APPLICANT AGREES TO MAINTAIN A CURRENT LIST OF EMERGENCY PHONE NUMBERS ON FILE WITH THE POLICE DEPARTMENT AT ALL TIMES.

A FEE OF \$25 DOLLARS MUST ACCOMPANY THIS APPLICATION TO COVER CLERICAL COSTS, AND INSPECTION IF NECESSARY. CHECKS MAY BE MADE PAYABLE TO THE TOWN OF BETHLEHEM.

Payment Received By: _____
Date: _____
Permit Approved By: _____
Date: _____

APPLICANT SIGNATURE

DRIVERS LICENSE NUMBER