

Woodstock Emergency Services
454 Woodstock Rd
Woodstock VT 05091

Alarm Registration Form
Expires December 31st
Year _____

Owner Information: Name: _____

Alarm Physical Address: House # _____ Street Name: _____

Mailing Address: _____

Home Phone: _____ Alternate Phone: _____

Email Address: _____

Alarm Information:

Alarm Company: _____ Phone: _____

Type of Alarm: Fire Burglar Audible Panic Silent

Lifeline Medical Conditions: _____

Property Management/Caretaker/Keyholder Information:

Name: _____ Phone(s): _____

Address: _____

Email _____

Please provide documentation that the alarm system has been inspected and serviced by a technically qualified person in the preceding 90 days in accordance with Section 5.

A "Knox" brand lock box is required for the registration of an alarm system. Applications and information to purchase one can be obtained at www.Knoxbox.com

The registration fee is \$75.00 per year payable to the Town of Woodstock. Send application and check to the address at the top of this application form (on the left), note Alarm Registration on envelope.

Please prepare and submit a floor plan showing location of: (use reverse side). If there is one on file, please submit any changes only. • Oil Tank • Electrical Panel • Control Panel for Alarm • LP Gas

Location of Knox box: _____

I have received, read, understand and agree to abide by the Alarm Ordinance as set forth on May 20, 2008, by the Select Board of the Town of Woodstock, VT.

Date Signature of Property Owner or Authorized Representation