



# TOWN OF WESTPORT

## DEPARTMENT OF POLICE

818 MAIN ROAD

WESTPORT, MA 02790-4311

Tel.# 508.636.1122 - Fax # 508.636.4108 - CJIS: WST - NCIC: MA0032000

KEITH A. PELLETIER

Chief of Police

JOHN R. GIFFORD

Deputy Chief

## ALARM REGISTRATION FORM

Office use only: Site# \_\_\_\_\_

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

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

Telephone: \_\_\_\_\_

Type of Alarm: Police \_\_\_\_\_ Fire \_\_\_\_\_ Medical \_\_\_\_\_ All \_\_\_\_\_

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

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

Primary Contact: Name \_\_\_\_\_

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

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

Secondary Contact: Name: \_\_\_\_\_

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

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

Additional contacts: \_\_\_\_\_

Any hazards on the property? \_\_\_\_\_

Any animals on the property? \_\_\_\_\_

Special directions to the home? \_\_\_\_\_