

DERBY POLICE DEPARTMENT

229 N. BALTIMORE
DERBY, KANSAS 67037
(316) 788-1557
Fax (316) 788-1547

CONFIDENTIAL ALARM REGISTRATION

BUSINESS ALARMS

| | | |
|---------------|------------------|------|
| BUSINESS NAME | TYPE OF BUSINESS | DATE |
|---------------|------------------|------|

| | |
|------------------|---------------------------|
| BUSINESS ADDRESS | DAYS & HOURS OF OPERATION |
|------------------|---------------------------|

| | | | |
|-------------------|-------------------|-------------------|--------------|
| BUSINESS PHONE #1 | BUSINESS PHONE #2 | BUSINESS PHONE #3 | BUSINESS FAX |
|-------------------|-------------------|-------------------|--------------|

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|--|
| ALARM TYPE (Check all that apply) Burglar alarm: <input type="checkbox"/> audible <input type="checkbox"/> silent Hold-up alarm: <input type="checkbox"/> audible <input type="checkbox"/> silent <input type="checkbox"/> activation prevents in-coming phone calls <input type="checkbox"/> Fire alarm |
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| | | |
|--------------------|---------|-----------------------|
| ALARM COMPANY NAME | ADDRESS | DISPATCH PHONE NUMBER |
|--------------------|---------|-----------------------|

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|--|
| IF THIS IS A NEW SYSTEM, WHAT WAS THE INSTALLATION DATE? (include documentation – copy of work order, invoice, etc.) |
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RESIDENTIAL ALARMS

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|---------|--------------|
| ADDRESS | PHONE NUMBER |
|---------|--------------|

| |
|-----------|
| USER NAME |
|-----------|

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| ALARM TYPE (Check all that apply) <input type="checkbox"/> Burglar alarm: <input type="checkbox"/> audible <input type="checkbox"/> silent <input type="checkbox"/> Panic alarm – user activated <input type="checkbox"/> Fire alarm <input type="checkbox"/> Medical alarm: <input type="checkbox"/> automatic <input type="checkbox"/> user activated Other: Explain: |
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| | | |
|--------------------|---------|-----------------------|
| ALARM COMPANY NAME | ADDRESS | DISPATCH PHONE NUMBER |
|--------------------|---------|-----------------------|

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|--|
| IF THIS IS A NEW SYSTEM, WHAT WAS THE INSTALLATION DATE? (include documentation – copy of work order, invoice, etc.) |
|--|

(Complete Notification Information on Reverse Side)

