

**FRANKLIN TOWNSHIP POLICE DEPARTMENT**  
**495 DEMOTT LANE, SOMERSET, NJ 08873**  
**732-873-5533 EXT. 2012      FAX 732-873-9019**  
**INITIAL ALARM SYSTEM REGISTRATION - EMERGENCY CONTACT FORM**

*Alarm Registration is required as per Township Ordinance No. 85  
Ordinance can found at [www.franklintwpnj.org](http://www.franklintwpnj.org)*

**ONE TIME REGISTRATION FEE**  
**Residential Alarm Fee \$25.00    Commercial Alarm Fee \$50.00**  
*Please make Checks to "Franklin Township Police Department"*  
**WE DO NOT ACCEPT CASH**

RESIDENT/BUSINESS NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ APT./SUITE \_\_\_\_\_

TOWN: \_\_\_\_\_ ZIP CODE \_\_\_\_\_

TELEPHONE NUMBER ( \_\_\_\_\_ ) - \_\_\_\_\_ - \_\_\_\_\_

1<sup>ST</sup> CONTACT \_\_\_\_\_ PH.# ( \_\_\_\_\_ ) - \_\_\_\_\_ - \_\_\_\_\_  
(Last Name, First Name)

2<sup>ND</sup> CONTACT \_\_\_\_\_ PH.# ( \_\_\_\_\_ ) - \_\_\_\_\_ - \_\_\_\_\_  
(Last Name, First Name)

3<sup>RD</sup> CONTACT \_\_\_\_\_ PH.# ( \_\_\_\_\_ ) - \_\_\_\_\_ - \_\_\_\_\_  
(Last Name, First Name)

4<sup>TH</sup> CONTACT \_\_\_\_\_ PH.# ( \_\_\_\_\_ ) - \_\_\_\_\_ - \_\_\_\_\_  
(Last Name, First Name)

**PERSON THAT IS RESPONSIBLE FOR AND SHOULD RECEIVE ALL MAIL CONCERNING THE ALARM SYSTEM  
AT THIS LOCATION: \_\_\_\_\_**

ALARM COMPANY'S NAME: \_\_\_\_\_ PHONE # ( \_\_\_\_\_ ) - \_\_\_\_\_ - \_\_\_\_\_

**\*\*\*\*\* Complete this section ONLY if the alarm's owner is different from above information \*\*\*\*\***

RESIDENT/BUSINESS NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

TELEPHONE NUMBER ( \_\_\_\_\_ ) - \_\_\_\_\_ - \_\_\_\_\_

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NAME OF PERSON COMPLETING FORM: \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**PLEASE PRINT ALL INFORMATION**  
*Please mail forms back to the attention of Diane Kline*

Residential Alarm Fee Paid \_\_\_\_\_  
(FOR POLICE USE ONLY)

Commercial Alarm Fee Paid \_\_\_\_\_  
(FOR POLICE USE ONLY)