



**COOLBAUGH TOWNSHIP ALARM PERMIT APPLICATION**

5520 MUNICIPAL DRIVE, TOBYHANNA, PA 18466 PH: 570.894.8490 FAX: 570.894.8413

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE # \_\_\_\_\_

**DESCRIPTION OF PROPERTY WHERE ALARM WILL BE OR HAS BEEN INSTALLED:**

DEVELOPMENT \_\_\_\_\_ ADDRESS \_\_\_\_\_

LOCATION OF HOME AND BRIEF DESCRIPTION \_\_\_\_\_

DESCRIPTION OF ALARM \_\_\_\_\_

MANUFACTURER AND MODEL # \_\_\_\_\_

INSTALLER: NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE # \_\_\_\_\_

**PERSON OR FIRM TO BE CONTACTED IN THE EVENT OF ALARM ACTIVATION:**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE # \_\_\_\_\_

**\*\*\*PERSON OR FIRM NAMED MUST BE AVAILABLE TO DEACTIVATE OR SHUT OFF ALARM WITHIN A REASONABLE TIME AFTER BEING NOTIFIED BY THE POLICE.**

**FEE: \$30.00 MAKE CHECKS PAYABLE TO COOLBAUGH TOWNSHIP**

SIGNATURE OF APPLICANT \_\_\_\_\_

DATE \_\_\_\_\_

\*\*\*\*\*THIS SECTION FOR TOWNSHIP USE ONLY\*\*\*\*\*

DATE RECEIVED \_\_\_\_\_ FEE REC'D \_\_\_\_\_ APPROVED BY: \_\_\_\_\_

DATE APPROVED \_\_\_\_\_ PERMIT # \_\_\_\_\_