



ISLAMORADA, VILLAGE OF ISLANDS

86800 Overseas Highway, Islamorada, FL 33036

Phone: 305-664-6400/305-664-6436

BURGLAR ALARM REGISTRATION

Date: _____

Physical Address (Alarm Location): _____

City: _____ State: _____ Zip Code: _____

Business Name (if applicable): _____

Applicant/Responsible Party: 1. _____
(Last) (First) (Middle)

_____ (Home Phone) (Work Phone) (Cell Phone)

2. _____
(Last) (First) (Middle)

_____ (Home Phone) (Work Phone) (Cell Phone)

Gate Code (if required): _____ Fire Key Box: Yes _____ No _____

Mailing Address (if different): _____

City: _____ State: _____ Zip Code: _____ Email Address: _____

Please list the name, address, and phone number of individuals, other than Applicant(s), who are able and authorized to enter the premises and deactivate the alarm in your absence.

	NAME	ADDRESS	PHONE NUMBER
1.			
2.			
3.			

(Please provide additional contact information on a separate page)

Please provide the name, address and telephone number of the Alarm Company monitoring the system:

_____ Alarm Company Name _____ Address _____ Phone Number

FAILURE TO UPDATE REGISTRATION WITHIN 48 HOURS OF ANY CHANGES SHALL RESULT IN A \$40.00 RE-REGISTRATION FEE. INFORMATION MUST BE KEPT CURRENT; CONTACT ISLAMORADA, VILLAGE OF ISLANDS WITH ANY CHANGES TO THE INFORMATION PROVIDED.

I certify the above information is correct and I will comply with the update provisions herein.

\$40.00 Initial Registration Fee

_____ Owners Signature (required)	_____ Date
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