



POLICE DEPARTMENT  
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CHIEF OF POLICE

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### ALARM PERMIT APPLICATION – 20\_\_

*A New Alarm Permit Application must be submitted to the Police Department yearly.*

NAME \_\_\_\_\_ HOME# \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_ WORK # \_\_\_\_\_

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

ALARM MONITORING COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE# \_\_\_\_\_

PURPOSE OF ALARM: \_\_\_\_\_ BURGLAR \_\_\_\_\_ FIRE \_\_\_\_\_ PRESSURE \_\_\_\_\_

OTHER – SPECIFY TYPE: \_\_\_\_\_

**IN CASE OF EMERGENCY, LIST IN PRIORITY ORDER, PERSONS TO BE CONTACTED AND/OR WHO HAVE A KEY TO THE BUILDING OTHER THAN THE OWNER.**

(1) NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE #:( ) \_\_\_\_\_ TITLE: \_\_\_\_\_

(2) NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE #: ( ) \_\_\_\_\_ TITLE: \_\_\_\_\_



\_\_\_\_\_  
NAME OF PERSON COMPLETING THIS APPLICATION

OWNER  RENTER

DO YOU OWN OR RENT ALARMED PROPERTY

\_\_\_\_\_  
DATE