



TOWN OF SHREWSBURY

KEVIN E. ANDERSON
CHIEF OF POLICE

DEPARTMENT OF POLICE

TEL. 508-845-4681
FAX 508-841-8494

106 MAPLE AVENUE
SHREWSBURY, MASSACHUSETTS 01545-2489

Alarm Registration Form

(Return completed form to Shrewsbury Police Department)

Resident or Business Name: _____

Street Address: _____

Home Phone: _____ **Work Phone:** _____

Alarm Owner: _____

Street Address: _____

City: _____ **State:** _____ **Zip:** _____

Home Phone: _____

Alternate Contact People: (Include name, address, home and work phone numbers)

1. _____

2. _____

3. _____

Alarm Information: Audible: _____ **Silent:** _____

Hold-up: _____ **Burglary:** _____ **Fire:** _____ **Medical:** _____

Alarm Server Company Name: _____

Street Address: _____ **City, State, Zip:** _____

Phone: _____ **Emergency 24 hr. Phone:** _____

Signature of Alarm Owner: _____ **Date:** _____