845-583-4350 Ext 15



Town of Bethel Building Departmen

PO Box 300, 3454 Route 55 White Lake, NY 12786

FOR OFFICE USE ONLY				
Date Registered:				
Date Expires:				
One Time Permit Fee: \$25.00				

Registration of Alarm System

Name:	Bethel Tax Map #:			
Mailing Address:				
Location Address:				
Phone Number:	Cell Phone Number:			
Alt Phone Number:				
Type of Alarm: (check al that apply) Medical/Panic		_		Heat
Knox-Box: Yes No				
Key Holders: Please print name and phore 1) 2) 3)				
Name & Address of Alarm Company:				
Alarm Company Telephone #:		_		
Signature of Applicant or Agent			Date	

Persons who violate Chapter 80 of the Code of the Town of Bethel shall be guilty of a violation and subject to punishment by a fine for the occurrence of one or more false alarms in any twelve month period, as determined by the date of the occurrence. Any person who fails to register his or her alarm system or fails to update changes in his or her registration information as required in section 80-3 hereof, or whose alarm system violates the standards set forth in section 80-6(A) hereof, shall be subject to punishment by a fine.