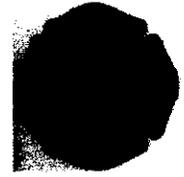




# FORT LEE FIRE PREVENTION BUREAU

Borough of Fort Lee  
309 Main Street  
Fort Lee, New Jersey 07024-4799



Cindy A. Vida  
Department Secretary  
Ext. 1011

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Clerk Typist  
Ext. 1014

### INSPECTORS

Jack Siccardi Ext. 1020  
John Pascale Ext. 1017  
Joseph Cariddi Ext. 1019  
Mary Boujotas Ext. 1016  
Leah Wasserman Ext. 1012

**Bureau of Alarms**  
Phone: (201) 592-3500 Ext. 1502  
Fax: (201) 585-1563

Steven James Curry, Fire Official/Fire Sub-Code, Ext. 1018

### *Billing/Mailing Address*

### *Alarm Site Information*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Business Phone:* \_\_\_\_\_

*Home Phone:* \_\_\_\_\_

Alarm Type: Burglar \_\_\_ Hold Up \_\_\_ Panic \_\_\_ Fire \_\_\_ Medical \_\_\_ Water Flow \_\_\_ Other \_\_\_  
Transmitted Via : Tape Dialer \_\_\_\_\_ Local/Central Station \_\_\_\_\_

### *To Whom It May Concern:*

*This is to advise you that you must register your alarm for the period starting January 1<sup>st</sup> of this year to January 1<sup>st</sup> of the next year. Please read this form and make any additions and/or revisions as requested. Return both forms with the fee as indicated on the invoice as soon as possible.*

**NOTE: FAILURE TO COMPLETE THIS FORM OR TO INCLUDE PAYMENT IN FULL WILL RESULT IN FINES OF \$50.00 PER YEAR. BOROUGH ORDINANCE: 79-4:1.15.**

### *Alarm Company Information*

Alarm Co. Name \_\_\_\_\_ Phone # \_\_\_\_\_

### *Emergency Contacts*

Name of responsible Person of Corp., LLC,  
Partner or Resident

Home Phone #

1) \_\_\_\_\_

\_\_\_\_\_

2) \_\_\_\_\_

\_\_\_\_\_

3) \_\_\_\_\_

\_\_\_\_\_

Your Signature \_\_\_\_\_

Date: \_\_\_\_\_

**Office Use Only**

Registration # \_\_\_\_\_

Invoice # \_\_\_\_\_