



2024 Alarm Registration Application

MUNICIPALITY OF LAKESHORE

419 Notre Dame Street
 Belle River, Ontario N0R 1A0
 Tel: (519) 728-2700 Fax: (519)-728-9530
www.lakeshore.ca

REGISTRATION FEE: \$24.00 + \$3.12 (HST) = \$27.12	
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PREMISE INFORMATION

OWNER NAME(S): _____

ADDRESS OF PROTECTED PREMISES	POSTAL CODE
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PHONE NUMBER	MAILING ADDRESS IF DIFFERENT THAN ABOVE
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EMAIL ADDRESS _____

ALARM INFORMATION

TYPE: Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Other <input type="checkbox"/>	Pharmacy <input type="checkbox"/> School <input type="checkbox"/> Financial Inst. <input type="checkbox"/>	Monitored <input type="checkbox"/> Non Monitored <input type="checkbox"/>	Video <input type="checkbox"/> Other (Specify) <input type="checkbox"/>
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KEY HOLDER INFORMATION

NAME	HOME #	CELL#	OTHER #

OTHER INFORMATION

Number of Pet(s) on Premises _____

SIGNATURE

It is the alarm user's responsibility to ensure that a security alarm is registered and to provide updates as to changes in contact information.

Name: (Print) _____ **Sign:** _____ **Date:** _____

The personal information collected on this form is for the purpose of administrating the Municipality's Security Alarm Registration Program in accordance with the *Municipal Act, 2001* and By-law 101-2001. Questions regarding collation of this information may be directed to the Civic Affairs, 419 Notre Dame Street, Belle River, Ontario N0R 1A0, 519-728-2700 or clerk@lakeshore.ca