



# HOLLIS COMMUNICATIONS CENTER HOLLIS, NEW HAMPSHIRE

MAILING ADDRESS: 9 Silver Lake Road Hollis NH, 03049

Manager Richard Todd

Supervisor Kassidy Walker

## TOWN OF HOLLIS ALARM PERMIT APPLICATION

This application must be completed before a permit can be issued. All information must be current. It is the responsibility of the permit holder to ensure that this information is current at all times.

**PERMIT FEE:** Transfer of alarm ownership- \$2.00  
Residential- \$ 15.00  
Non-residential (commercial) \$ 25.00

**Permit fee MUST accompany this application- Cash or Check ONLY**

**EXEMPTIONS:** Medical Alert Alarms  
Principal occupant age 65 or older  
Government Facility

**Checks should be made out to:  
"TOWN OF HOLLIS POLICE  
DEPARTMENT"**

**OWNER OF RESIDENCE/NAME OF BUSINESS:** \_\_\_\_\_

**ADDRESS & TOWN:** \_\_\_\_\_

**LOCATION TELEPHONE:** \_\_\_\_\_

**TYPE OF ALARM(s):** ☐ FIRE ☐ BURGLARY ☐ PANIC/DISTRESS ☐ MEDICAL

**TYPE OF SYSTEM(s):** ☐ CENTRAL STATION ☐ DIGITAL DIALER ☐ COMBINATION

☐ LOCAL AUDIBLE ONLY ☐ SECURITY CAMERA

**ALARM COMPANY MONITORING THE SYSTEM:** \_\_\_\_\_

**COMPANY ADDRESS:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **DATE OF INSTALLATION:** \_\_\_\_\_



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**NOTIFICATION LIST:** Person(s) in the Hollis area to be notified if your alarm activates. Homeowners may list work numbers and or cell phones. List in the order you wish the calls to be made.

1. \_\_\_\_\_  
NAME ADDRESS PHONE
2. \_\_\_\_\_  
NAME ADDRESS PHONE
3. \_\_\_\_\_  
NAME ADDRESS PHONE

Submitted By: \_\_\_\_\_ Date: \_\_\_\_\_

**\*DISCLAIMER\*-** Permits issued under the Alarm Ordinance may be suspended or revoked after notice and hearing. A service fee of \$25.00 may be imposed for each False Alarm in excess of four (4) in a 12-month period. Questions concerning the Alarm Ordinance should be brought to the Office of the Selectmen.

## OFFICAL USE ONLY:

Received By: \_\_\_\_\_ Date: \_\_\_\_\_

Entered By: \_\_\_\_\_ Date: \_\_\_\_\_