

Tunkhannock Township Permit Application

P.O. Box 203  
Long Pond PA 18334  
(570) 646-3008 FAX: (570) 643-5469

**EMERGENCY ALARM PERMIT APPLICATION**

Owner: \_\_\_\_\_

Mailing  
Address: \_\_\_\_\_

City & State: \_\_\_\_\_

Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

911 Address: \_\_\_\_\_

Lot/Sec: \_\_\_\_\_

Subdivision: \_\_\_\_\_

Township Road: \_\_\_\_\_

Contractor: \_\_\_\_\_

Address: \_\_\_\_\_

City & State: \_\_\_\_\_

Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

ALARM INFORMATION

DESCRIPTION OF TYPE (S) OF ALARM:

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

ALARM MODEL NUMBER: \_\_\_\_\_

MANUFACTURER: \_\_\_\_\_

CONTACT PERSON:

NAME: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

City & State: \_\_\_\_\_

Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

PERSON OR FIRM LISTED ABOVE MUST BE  
AVAILABLE 24 HOURS/DAY, 365 DAYS/YEAR, AND  
IS REQUIRED TO ARRIVE AT THE ALARM LOCATION  
WITHIN A REASONABLE TIME AFTER POLICE  
NOTIFICATION.

**Additional Information:**

Applicant Signature: \_\_\_\_\_

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

OFFICE USE

Application Number: \_\_\_\_\_

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

Application Fee: \$20

Paid: \_\_\_\_\_ Check #: \_\_\_\_\_

Received: \_\_\_\_\_ C&D #: \_\_\_\_\_

\_\_\_\_\_  
Zoning Officer

\_\_\_\_\_  
Date