

Scotts Bluff County Consolidated Communications Center
1825 10th Street
Gering Ne 69341
308-436-6667
308-436-4794 fax

Name of Business/Residence: _____
Address: _____
Phone: Business _____ Home _____ Cell _____
Email Address _____

Account Information

Phone: _____
Alarm Company; Burglary _____
Alarm Company: Fire _____

Type: Burglary _____ Fire _____ Supervisory _____ Panic _____ Carbon _____

After Hour Alarm contacts to call:

Name/phone _____
Name/phone _____
Name/phone _____

.....
Fees: Alarm connection to County receiver, automatic dialer, Third party notifications
\$90.00 Annual Fee for burglary and \$125.00 for fire Billing is from February to February
.....

This service is provided by Scotts Bluff county without liability to the County in the event of a malfunction or line disruption one either the applicant's or the County alarm monitoring equipment and the County disclaims and representation covering the response that members of FIRE or LAW ENFORCEMENT will make upon receipt of alarms on such equipment.
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I also agree to allow law enforcement of fire service entities or their representatives to inspect the alarm system under this document for the purpose of ascertaining that the information furnished on this application is correct, and that the system is installed in accordance with the requirements of the Scotts Bluff County Consolidated Communications Center.

Signature _____ Date _____

All changes must be made in writing.