



**TOWN OF TRUMBULL ALARM ADMINISTRATION**  
c/o Trumbull Police Department  
158 Edison Road, Trumbull, CT 06611  
203 452-5089

**ALARMS ADMINISTRATION APPEALS REQUEST FORM**

Please complete this form and mail to the Alarm Administrator. The address and phone number are located at the top of this sheet. You may also submit any additional documentation you have to support your appeal. You will be notified in writing of the decision of the Alarm Administrator. For additional information or to obtain a registration form, please visit [www.trumbull-ct.gov](http://www.trumbull-ct.gov). Thank you.

**Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

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

**Alarm Account Information:** \_\_\_\_\_

**Reason For Appeal:**

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

**Alarm Administrator use only:**

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