



**Control of Noise (Code of Practice on Noise from Audible Intruder Alarms)
Order 1981**

Burglar Alarm – Keyholder Information Form

This information is given voluntarily. It will help the Council prevent a nuisance from your alarm should it be wrongly triggered whilst you are away from home. The authority of a key holder will possibly save the alarm owner the expense of paying the Council's Alarm Contractor to stop the alarm.

To: Environmental Services & Consumer Protection Division, Environmental Health Service -
Public Health, Southampton City Council, Southbrook Rise, 4-8 Millbrook Road East,
Southampton SO15 1YG Fax No. (023) 8083 2029
E-mail public.health@southampton.gov.uk

Section A: To be completed by the Person Responsible for the Alarm	
Address of premises where the alarm is installed:	
Name of Occupier:	
Telephone Number:	
Name of person responsible for the alarm (if different from above):	
Address (if different to alarm address):	
Telephone Number (if different to above):	
Does the alarm have a maintenance contractor? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please give details:	
I have checked these details and found them correct, and I give my permission for them to be held on file and/or computer:	
Signature:	Date:
Section B: To be completed by the Nominated Keyholders	
Name:	
Address:	
Telephone Number:	
I have checked these details and found them correct, and I give my permission for them to be held on file and/or computer.	
Signature:	Date:
Name:	
Address:	
Telephone Number:	
I have checked these details and found them correct, and I give my permission for them to be held on file and/or computer.	
Signature:	Date:

Keyholder