

NO-ALARM AFFIDAVIT

STATE OF _____)

) ss.:

COUNTY OF _____)

I, _____, being duly sworn deposes and says:

1. I am the owner, lessee, legal representative or agent of the premises located at :

_____ and I am fully familiar with the premises and various physical service systems operating on the subject premises.

2. I affirmatively declare that the subject premises does not contain an emergency alarm system (neither fire nor security).
3. I make this affidavit knowing that the Town of Riverhead is relying upon my declaration herein as to the truth of the matter so asserted.

(Sign) _____

(Print Name):

(Title): _____

(Business Name): _____

(Permit No.): _____

(Date): _____

Sworn to before me on this _____

day of _____, 20__

Notary Public