



# OFFICE OF THE SHERIFF

Menominee County, Wisconsin

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[Sheriff@co.menominee.wi.us](mailto:Sheriff@co.menominee.wi.us)

Sheriff Rebecca Smith

Chief Deputy David Kristof

## Residential Alarm Registration Form

**\*\*Please complete this information as accurately as possible so we can provide the best service possible for you and your property\*\***

Your Information (Please provide your full name and DOB so we can enter you properly into our system)

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

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

Alarm Information (Property within Menominee County)

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

Alarm Monitoring Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Seasonal Property? Yes  No  Property will be vacant from: \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_

**\*\*The Menominee County Sheriff's Department strongly suggests you designate several people as "Key-holders". Key-holders are close friends, relatives, or neighbors you have chosen to hold and keep a key for your residence along with disarming/resetting information for your alarm system. Key-holders are crucial in the event the Sheriff's Department needs access to your property and you are not available.\*\***

Primary Key-holder Information (If possible please provide full name and DOB for Key-holders)

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

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

(Key holder #2)

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

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

(Key holder #3)

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

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

\*\*For some residents it is common practice to hide a door key on the property. In the past, property owners have provided our agency the location of hidden keys and/or written instructions for disarming/resetting alarm systems. This information will be used as a last resort in the event you or your key-holders were not available. If you would like to leave this information with us please provide it below.

Describe location of hidden key:

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

Alarm disarming/resetting code or procedure:

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

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

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

**Send completed form & \$25.00 annual fee to:  
Menominee County Sheriff's Office  
P O Box 190  
Keshena, WI 54135**