



CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530
Phone: (609)397-0110
Fax: (609)397-2203

SHIP TO

MUNICIPAL COURT
CITY OF LAMBERTVILLE
25 SOUTH UNION ST
LAMBERTVILLE, NJ 08530

VENDOR

Vendor #: HOLIC010

HOLICONG LOCKSMITHS
& CENTRAL SECURITY, INC
PO BOX 126
HOLICONG, PA 18928-0126

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 23-00265-04

ORDER DATE: 02/08/23
DELIVERY DATE: 11/08/23
STATE CONTRACT:
VENDOR ACCT NUM:
VENDOR PHONE #: (215)794-7542
VENDOR FAX #: (215)794-0837
VENDOR EMAIL: acctreceivable@holicongsecurity.com
REQUISITION #:

PAYMENT RECORD

CHECK NO.

103616

DATE PAID

PAID NOV 16 2023

NOTICE: TAX EXEMPT - TAX ID: 22-6002021

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	25 S UNION; INV R 183331	3-01-43-490-224 COURT Cleaning & Maint of Buildings	167.4000	167.40
			TOTAL	=====
				167.40

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under penalties; of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any; person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

VENDOR SIGN HERE

OFFICIAL POSITION

DATE

TAX ID NO. OR SOCIAL SECURITY NO.

OFFICER'S CERTIFICATION

I, having knowledge of the facts, certify that the materials and supplies have been received or the services rendered; said certification being based on signed delivery slips or other reasonable procedures.

DEPT. HEAD

DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:

CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

Department Head

Deputy Treasurer

City Clerk/Business Admin.

Holicong Security

P.O. Box 126
Holicong, PA 18928
215-794-7542

INVOICE

Date 11/06/23

Please Remit Payment By: 12/06/23

Tear Off This Top Stub And Return With Payment

Page 1

City Of Lambertville
18 York Street
Lambertville, NJ 08530

City Of Lambertville Lambertville Municipi
25 S Union Street
Lambertville, NJ 08530

Account No	Invoice No	P.O Number	Sales Person	Please Pay This Amount
LAM10	R 183331			167.40

Description	Tax	Amount
800 Service		12.00
Additional Area / O/C With Windows		33.00
24 Hour Automatic Test Timer		18.00
High/Low Temperature Monitoring		15.00
Open/Close Monitoring with Windows		108.00
For Period DEC 1, 2023 To FEB 29, 2024		
Reflects 10% Monitoring Discount For 3 - 5 Locations		-18.60

Payment due by December 10th
CALL US TO SET UP AUTOPAY!!!
Holicong Security

Total Charges	167.40
Sales Tax	0.00
Total Due	167.40



CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530
Phone: (609)397-0110
Fax: (609)397-2203

SHIP TO

MUNICIPAL COURT
CITY OF LAMBERTVILLE
25 SOUTH UNION ST
LAMBERTVILLE, NJ 08530

VENDOR

Vendor #: Holicong

HOLICONG LOCKSMITHS
& CENTRAL SECURITY, INC
PO BOX 126
HOLICONG, PA 18928-0126

Purchase Order

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PACKING LISTS, CORRESPONDENCE, ETC.

NO. 23-00265-04

ORDER DATE: 02/08/23
DELIVERY DATE: 11/08/23
STATE CONTRACT:
VENDOR ACCT NUM:
VENDOR PHONE #: (215)794-7542
VENDOR FAX #: (215)794-0837
VENDOR EMAIL: acctsreceivable@holicongsecurity.com
REQUISITION #:

PAYMENT RECORD

CHECK NO.

DATE PAID

NOTICE: TAX EXEMPT - TAX ID: 22-6002021

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	25 S UNION; INV R 183331	3-01-43-490-224 COURT Cleaning & Maint of Buildings	167.4000	167.40
			TOTAL	=====
				167.40

CLAIMANT'S CERTIFICATION & DECLARATION

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VENDOR SIGN HERE

OFFICIAL POSITION

DATE

TAX ID NO. OR SOCIAL SECURITY NO.

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DEPT. HEAD

DATE

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CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530

APPROVAL TO PURCHASE

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Department Head

Deputy Treasurer

City Clerk/Business Admin.



CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530
Phone: (609)397-0110
Fax: (609)397-2203

SHIP TO

POLICE DEPARTMENT
CITY OF LAMBERTVILLE
349 NORTH MAIN STREET
LAMBERTVILLE, NJ 08530

VENDOR

Vendor #: HOLIC010

HOLICONG LOCKSMITHS
& CENTRAL SECURITY, INC
PO BOX 126
HOLICONG, PA 18928-0126

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 23-00081-04

ORDER DATE: 01/10/23

DELIVERY DATE: 10/05/23

STATE CONTRACT:

VENDOR ACCT NUM:

VENDOR PHONE #: (215)794-7542

VENDOR FAX #: (215)794-0837

VENDOR EMAIL: acctsreceivable@holicongsecurity.com

REQUISITION #:

PAYMENT RECORD

CHECK NO.

103511

DATE PAID

PAID OCT 19 2023

NOTICE: TAX EXEMPT - TAX ID: 22-6002021

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	349 N MAIN; INV R182851	3-01-25-240-229	96.7700	96.77
		POLICE Other Contractual Items		
			TOTAL	96.77

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under penalties; of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any; person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

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18 YORK ST
LAMBERTVILLE, NJ 08530

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Department Head

Deputy Treasurer

City Clerk/Business Admin.

Holicong Security

P.O. Box 126
Holicong, PA 18928
215-794-7542

INVOICE

Date 10/05/23
Please Remit Payment By: 10/25/23

Tear Off This Top Stub And Return With Payment

Page 1

City Of Lambertville
18 York Street
Lambertville, NJ 08530

Lambertville Police Department
349 N Main Street
Lambertville, NJ 08530

Account No	Invoice No	P.O Number	Sales Person	Please Pay This Amount
LAM08	R 182851			96.77

Description	Tax	Amount
Commercial Entrance/Exit Monitoring For Period NOV 1, 2023 To JAN 31, 2024		89.85
24 Hour Automatic Test Timer		18.00
800 Service		6.00
15% Special Discount for Police Departments		-17.08

**Payment due by November 10th
CALL US TO SET UP AUTOPAY!!!**
Holicong Security

Total Charges	96.77
Sales Tax	0.00
Total Due	96.77



CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530
Phone: (609)397-0110
Fax: (609)397-2203

SHIP TO

POLICE DEPARTMENT
CITY OF LAMBERTVILLE
349 NORTH MAIN STREET
LAMBERTVILLE, NJ 08530

VENDOR

Vendor #: HOLIC010

HOLICONG LOCKSMITHS
& CENTRAL SECURITY, INC
PO BOX 126
HOLICONG, PA 18928-0126

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 23-00081-04

ORDER DATE: 01/10/23
DELIVERY DATE: 10/05/23
STATE CONTRACT:
VENDOR ACCT NUM:
VENDOR PHONE #: (215)794-7542
VENDOR FAX #: (215)794-0837
VENDOR EMAIL: acctsreceivable@holicongsecurity.com
REQUISITION #:

PAYMENT RECORD

CHECK NO.

DATE PAID

NOTICE: TAX EXEMPT - TAX ID: 22-6002021

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	349 N MAIN; INV R182851	3-01-25-240-229 POLICE Other Contractual Items	96.7700	96.77
			TOTAL	96.77

CLAIMANT'S CERTIFICATION & DECLARATION

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OFFICIAL POSITION

DATE

TAX ID NO. OR SOCIAL SECURITY NO.

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DEPT. HEAD

DATE

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CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

Department Head

Deputy Treasurer

City Clerk/Business Admin.



CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530
Phone: (609)397-0110
Fax: (609)397-2203

SHIP TO

CITY CLERK
CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530

VENDOR

Vendor #: HOLIC010

HOLICONG LOCKSMITHS
& CENTRAL SECURITY, INC
PO BOX 126
HOLICONG, PA 18928-0126

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 23-01185

ORDER DATE: 08/22/23

DELIVERY DATE:

STATE CONTRACT:

VENDOR ACCT NUM:

VENDOR PHONE #: (215)794-7542

VENDOR FAX #: (215)794-0837

VENDOR EMAIL: acctsreceivable@holicongsecurity.com

REQUISITION #:

PAYMENT RECORD

CHECK NO.

DATE PAID

103410
PAID SEP 21 2023

NOTICE: TAX EXEMPT - TAX ID: 22-6002021

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	SERV CALL JUST CTR; P55978	3-01-26-310-224	424.5800	424.58
		BUILINGS Cleaning & Maint of Building		
			TOTAL	424.58

CLAIMANT'S CERTIFICATION & DECLARATION

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OFFICIAL POSITION

DATE

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DEPT. HEAD DATE

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CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530

APPROVAL TO PURCHASE

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Department Head

Deputy Treasurer

City Clerk/Business Admin.

Holicong Security

P.O. Box 126
Holicong, PA 18928
215-794-7542

INVOICE

Date 8/15/23

Please Remit Payment By: 9/14/23

Tear Off This Top Stub And Return With Payment

Page 1

City Of Lambertville
18 York Street
Lambertville, NJ 08530

City Of Lambertville Lambertville Municipi
25 S Union Street
Lambertville, NJ 08530

Account No	Invoice No	P.O Number	Sales Person	Please Pay This Amount
LAM10	P 55978	Cindy Ege		424.58

Qty	Part Number	Part Description	Price Each Tax	Amount
-----	-------------	------------------	----------------	--------

8/15/23 - Service call to reset programming, arm/disarm,
test panics, replace keypad. Tested system functions and communications;
ok.

N 424.58

Service Call = \$87.95 (covers first 15 minutes)
45 additional minutes @ \$99.50/hour (1 tech)

Parts = \$262.00
*one English Text keypad

Payment Due Upon Receipt

Holicong Security

Total Charges	424.58
Sales Tax	0.00
Total Due	424.58



18 YORK ST
LAMBERTVILLE, NJ 08530
Phone: (609)397-0110
Fax: (609)397-2203

SHIP TO

CITY CLERK
CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530

VENDOR

Vendor #: HOLIC010

HOLICONG LOCKSMITHS
& CENTRAL SECURITY, INC
PO BOX 126
HOLICONG, PA 18928-0126

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 23-01185

ORDER DATE: 08/22/23

DELIVERY DATE:

STATE CONTRACT:

VENDOR ACCT NUM:

VENDOR PHONE #: (215)794-7542

VENDOR FAX #: (215)794-0837

VENDOR EMAIL: acctsreceivable@holicongsecurity.com

REQUISITION #:

PAYMENT RECORD

CHECK NO.

DATE PAID

NOTICE: TAX EXEMPT - TAX ID: 22-6002021

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	SERV CALL JUST CTR; P55978	3-01-26-310-224 BUILDINGS Cleaning & Maint of Building	424.5800	424.58
			TOTAL	424.58

CLAIMANT'S CERTIFICATION & DECLARATION

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OFFICIAL POSITION

TAX ID NO. OR SOCIAL SECURITY NO.

OFFICER'S CERTIFICATION

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DEPT. HEAD DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:

CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

Department Head

Deputy Treasurer

City Clerk/Business Admin.



CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530
Phone: (609)397-0110
Fax: (609)397-2203

SHIP TO

FINANCE DEPARTMENT
CITY OF LAMBERTVILLE
18 YORK STREET
LAMBERTVILLE, NJ 08530

VENDOR

Vendor #: Holicong010

HOLICONG LOCKSMITHS
& CENTRAL SECURITY, INC
PO BOX 126
HOLICONG, PA 18928-0126

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 23-01277

ORDER DATE: 09/07/23
DELIVERY DATE: 09/07/23
STATE CONTRACT:
VENDOR ACCT NUM:
VENDOR PHONE #: (215)794-7542
VENDOR FAX #: (215)794-0837
VENDOR EMAIL: acctreceivable@holicongsecurity.com
REQUISITION #:

PAYMENT RECORD

CHECK NO.

103410

DATE PAID

PAID SEP 21 2023

NOTICE: TAX EXEMPT - TAX ID: 22-6002021

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	18 YORK FIRE MONITOR; R182222 PERIOD OCT 1 - DEC 31 2023	3-01-26-310-299 BUILDINGS Misc & Other Admin Costs	88.3500	88.35
			TOTAL	=====
				88.35

CLAIMANT'S CERTIFICATION & DECLARATION

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OFFICIAL POSITION

DATE

TAX ID NO. OR SOCIAL SECURITY NO.

OFFICER'S CERTIFICATION

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DEPT. HEAD

DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:

CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530

APPROVAL TO PURCHASE

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IS SIGNED BELOW

Department Head

Deputy Treasurer

City Clerk/Business Admin.

Holicong Security

P.O. Box 126
Holicong, PA 18928
215-794-7542

INVOICE

Date 9/05/23
Please Remit Payment By: 9/25/23

Tear Off This Top Stub And Return With Payment

Page 1

City Of Lambertville
18 York Street
Lambertville, NJ 08530

City Of Lambertville
18 York Street
Lambertville, NJ 08530

Account No	Invoice No	P.O Number	Sales Person	Please Pay This Amount
CIT01	R 182222			88.35

Description	Tax	Amount
Fire System Monitoring		93.00
For Period OCT 1, 2023 To DEC 31, 2023		
Reflects 5% Monitoring Discount For 2 Locations		-4.65

Payment due by October 10th
CALL US TO SET UP AUTOPAY!!!

Holicong Security

Total Charges	88.35
Sales Tax	0.00
Total Due	88.35



18 YORK ST
LAMBERTVILLE, NJ 08530
Phone: (609)397-0110
Fax: (609)397-2203

SHIP TO

FINANCE DEPARTMENT
CITY OF LAMBERTVILLE
18 YORK STREET
LAMBERTVILLE, NJ 08530

VENDOR

Vendor #: Holicong

HOLICONG LOCKSMITHS
& CENTRAL SECURITY, INC
PO BOX 126
HOLICONG, PA 18928-0126

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 23-01277

ORDER DATE: 09/07/23

DELIVERY DATE: 09/07/23

STATE CONTRACT:

VENDOR ACCT NUM:

VENDOR PHONE #: (215)794-7542

VENDOR FAX #: (215)794-0837

VENDOR EMAIL: acctsreceivable@holicongsecurity.com

REQUISITION #:

PAYMENT RECORD

CHECK NO.

DATE PAID

NOTICE: TAX EXEMPT - TAX ID: 22-6002021

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	18 YORK FIRE MONITOR; R182222 PERIOD OCT 1 - DEC 31 2023	3-01-26-310-299 BUILDINGS Misc & Other Admin Costs	88.3500	88.35
			TOTAL	88.35

CLAIMANT'S CERTIFICATION & DECLARATION

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CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530

APPROVAL TO PURCHASE

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Department Head

Deputy Treasurer

City Clerk/Business Admin.



CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530
Phone: (609)397-0110
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SHIP TO

FINANCE DEPARTMENT
CITY OF LAMBERTVILLE
18 YORK STREET
LAMBERTVILLE, NJ 08530

VENDOR

Vendor #: Holicong

HOLICONG LOCKSMITHS
& CENTRAL SECURITY, INC
PO BOX 126
HOLICONG, PA 18928-0126

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 23-01308

ORDER DATE: 09/19/23
DELIVERY DATE:
STATE CONTRACT:
VENDOR ACCT NUM:
VENDOR PHONE #: (215)794-7542
VENDOR FAX #: (215)794-0837
VENDOR EMAIL: acctreceivable@holicongsecurity.com
REQUISITION #:

PAYMENT RECORD

CHECK NO.

103410

DATE PAID

PAID SEP 21 2023

NOTICE: TAX EXEMPT - TAX ID: 22-6002021

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	ANNUAL FIRE INSPEC; 349 N MAIN P56101	3-01-26-310-224 BUILINGS Cleaning & Maint of Building	127.5800	127.58
			TOTAL	=====
				127.58

CLAIMANT'S CERTIFICATION & DECLARATION

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CITY OF LAMBERTVILLE
18 YORK ST
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Department Head

Deputy Treasurer

City Clerk/Business Admin.



HOLICONG

LOCKSMITHS AND CENTRAL SECURITY INC.
P.O. BOX 126 • HOLICONG, PENNSYLVANIA 18928
(215) 794-7542 • FAX: (215) 794-0837

INVOICE

DATE 9/07/23

TO:

City Of Lambertville
18 York Street
Lambertville, NJ 08530

Job Site:

Lambertville Police Department
349 N Main Street
Lambertville, NJ 08530

Page 1

ACCOUNT NO.

INVOICE NO.

P.O. NUMBER

SALESPERSON

PLEASE PAY THIS AMOUNT

LAM08

P 56101

Kelly Kascik

127.58

PLEASE TEAR HERE • PLEASE TEAR HERE • PLEASE TEAR HERE • PLEASE TEAR HERE • PLEASE TEAR HERE • PLEASE TEAR HERE • PLEASE TEAR HERE • PLEASE TEAR HERE • PLEASE TEAR HERE • PLEASE TEAR HERE

DESCRIPTION

AMOUNT

9/5/23 - Annual Fire Inspection; tested all known fire devices and communications. Tagged panel. Completed NFPA fire inspection certificate; copy enclosed.

127.58

Service Call = \$87.95 (covers first 15 minutes)
15 additional minutes @ \$158.50/hour (2 techs)

Payment Due Upon Receipt

SUB TOTAL

127.58

TAX

0.00

TOTAL DUE

127.58

Holicong Security Acct#: LAM08 INV56101

P.O. BOX 126 • HOLICONG, PA 18928 • 215-794-7542



HOLLISTON
LOCKSMITHING AND SECURITY, INC.
P.O. BOX 152 • HOLLISTON, MASSACHUSETTS 01923
(508) 794-1542 • FAX: (508) 794-0527

INVOICE

DATE: 05/13/05

Holliston Police Department
319 N Main Street
Holliston, MA 01923

City of Holliston
18 York Street
Holliston, MA 01923

Page 1

127.50

Key Bank

P. 50134

127.50

W-2's - Annual file processing turned in known the amount of
communications turned in for the reporting
period, and reported.

Service Call - 2005 (over 12 months)
12 additional minutes (21.50 hours) (21.50)

127.50

Sub Total

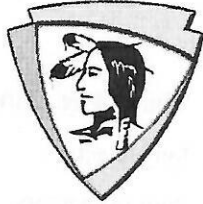
0.00

Tax

127.50

Total Due

Holliston Police Department
P.O. Box 152 • Holliston, MA 01923
(508) 794-1542 • FAX: (508) 794-0527



HOLICONG Security

1968 Holicong Road, PO Box 126 Holicong, PA 18928
215-794-7542 www.holicongsecurity.com

INSPECTION AND TESTING FORM

Date: 9/5/23 Time: 9:20-9:50

SERVICE ORGANIZATION

Name: Holicong Locksmith & Central Security
Address: 1968 Holicong Road Holicong, PA. 18928
Representative: _____
License No.: P00976/181212
Telephone: 215-794-7542

MONITORING ENTITY

Contact: Holicong Security
Telephone: 1-800-639-7019
Monitoring Account Ref. No.: 3483

TYPE TRANSMISSION

☐ McCulloh ☐ Multiplex ☒ Digital
☐ Reverse Priority ☐ RF
☐ Other (Specify) _____
Control Unit Manufacturer: DMP
Model No.: XR20
Circuit Styles: B
Number of Circuits: 1
Software Rev.: _____
Last Date System Had Any Service Performed: _____
Last Date That Any Software or Configuration Was Revised: _____

PROPERTY NAME (USER)

Name: Lambertville Police Department
Address: 349 N. Main Street
Owner Contact: _____
Telephone: _____

APPROVING AGENCY

Contact: N/A
Telephone: _____

SERVICE

☐ Weekly ☐ Monthly ☐ Quarterly
☐ Semiannually ☒ Annually
☐ Other (Specify) _____

Lambertville NJ 08530

ALARM-INITIATING DEVICES AND CIRCUIT INFORMATION

Quantity of Devices Installed	Circuit Style	Quantity of Devices Tested	
_____	_____	_____	Manual Fire Alarm Boxes
_____	_____	_____	Ion Detectors
4	B	4	Photo Detectors
_____	_____	_____	Duct Detectors
_____	_____	_____	Heat Detectors
_____	_____	_____	Waterflow Switches
_____	_____	_____	Supervisory Switches
_____	_____	_____	Other (Specify): _____

Alarm verification feature is ☐ disabled ☒ enabled

ALARM NOTIFICATION APPLIANCES AND CIRCUIT INFORMATION

Quantity of Appliances Installed	Circuit Style	Quantity of Appliances Tested	
_____	_____	_____	Bells
_____	_____	_____	Horns
_____	_____	_____	Chimes
_____	_____	_____	Strobes
_____	_____	_____	Speakers
2	B	2	Other (Specify): <u>sirens</u>

No. of alarm notification appliance circuits: 1

Are circuits monitored for integrity? ☐ Yes ☒ No

SUPERVISORY SIGNAL-INITIATING DEVICES AND CIRCUIT INFORMATION

Quantity of Devices Installed	Circuit Style	Quantity of Devices Tested	
_____	_____	_____	Building Temp.
_____	_____	_____	Site Water Temp.
_____	_____	_____	Site Water Level
_____	_____	_____	Fire Pump Power
_____	_____	_____	Fire Pump Running
_____	_____	_____	Fire Pump Auto Position
_____	_____	_____	Fire Pump or Pump Controller Trouble
_____	_____	_____	Fire Pump Running
_____	_____	_____	Generator in Auto Position
_____	_____	_____	Generator or Controller Trouble
_____	_____	_____	Switch Transfer
_____	_____	_____	Generator Engine Running
_____	_____	_____	Other (Specify): _____

SIGNALING LINE CIRCUITS

Quantity and style of signaling line circuits connected to system (see NFPA 72[®], Table 6.6.1)

Quantity _____ Style(s) _____

SYSTEM POWER SUPPLIES

(a) Primary (Main): Nominal Voltage 16.5 Amps 40 via
Overcurrent Protection: Type Breaker Amps 15
Location (of Primary Supply Panelboard): rear storage
Disconnecting Means Location: circuit breaker

(b) Secondary (Standby):
12v Storage Battery: Amp-Hr Rating 7ap
Calculated capacity in _____ Amp-Hrs to operate system for 24 hours
Engine-driven generator dedicated to fire alarm system: _____
Location of fuel storage: _____

TYPE BATTERY

☐ Dry Cell ☐ Lead-Acid
☐ Nickel-Cadmium ☐ Other (Specify): _____
☒ Sealed Lead Acid

(c) Emergency or standby system used as a backup to primary power supply, instead of using a secondary power supply:

Emergency system described in NFPA 70[®], Article 700

Legally required standby described in NFPA 70[®], Article 701

Optional standby system described in NFPA 70[®], Article 702, which also meets the performance requirements of Article 700 or 701

PRIOR TO ANY TESTING

NOTIFICATIONS ARE MADE

	Yes	No	Who	Time
Monitoring Entity	☒	☐	<u>h/c's</u>	<u>9 20</u>
Building Occupants	☒	☐	<u>staff</u>	<u>9 20</u>
Building Management	☒	☐	<u>Kelly</u>	<u>9 20</u>
Other (Specify)	☐	☐	_____	_____
AHJ Notified of Any Impairments	☐	☐	_____	_____

SYSTEM TESTS AND INSPECTIONS

TYPE	Visual	Functional	Comments
Control Unit	☒	☒	
Interface Equipment	☒	☒	
Lamps/LEDs	☒	☒	
Fuses	☒	☒	
Primary Power Supply	☒	☒	
Trouble Signals	☒	☒	
Disconnect Switches	☐	☐	
Ground-Fault Monitoring	☐	☐	

SECONDARY POWER

TYPE	Visual	Functional	Comments
Battery Condition	☒		
Load Voltage		☐	
Discharge Test		☐	
Charger Test		☐	
Specific Gravity		☐	
TRANSIENT SUPPRESSORS	☐		
REMOTE ANNUNCIATORS	☒	☒	<i>@ office @ rear hall</i>
NOTIFICATION APPLIANCES			
Audible	☒	☒	
Visible	☐	☐	
Speakers	☐	☐	
Voice Clarity		☐	

INITIATING AND SUPERVISORY DEVICE TESTS AND INSPECTIONS

Loc. & S/N	Device Type	Visual Check	Functional Test	Factory Setting	Measured Setting	Pass	Fail
		☐	☐			☐	☐
		☐	☐			☐	☐
		☐	☐			☐	☐
		☐	☐			☐	☐
		☐	☐			☐	☐
		☐	☐			☐	☐

Comments:

EMERGENCY COMMUNICATIONS EQUIPMENT

	Visual	Functional	Comments
Phone Set	☐	☐	
Phone Jacks	☒	☒	
Off-Hook Indicator	☐	☐	
Amplifier(s)	☐	☐	
Tone Generator(s)	☐	☐	
Call-in Signal	☐	☐	
System Performance	☐	☐	

COMBINATION SYSTEMS

	Visual	Device Operation	Simulated Operation
Fire Extinguisher Monitoring Device System	☐	☐	☐
Carbon Monoxide Detector System	☐	☐	☐
(Specify) _____	☐	☐	☐

INTERFACE EQUIPMENT

(Specify) _____	☐	☐	☐
(Specify) _____	☐	☐	☐
(Specify) _____	☐	☐	☐

SPECIAL HAZARD SYSTEMS

(Specify) _____	☐	☐	☐
(Specify) _____	☐	☐	☐
(Specify) _____	☐	☐	☐

Special Procedures:

Comments:

SUPERVISING STATION MONITORING

	Yes	No	Time	Comments
Alarm Signal	☒	☐		
Alarm Restoration	☒	☐		
Trouble Signal	☒	☐		
Trouble Signal Restoration	☒	☐		
Supervisory Signal	☐	☐		
Supervisory Restoration	☐	☐		



18 YORK ST
LAMBERTVILLE, NJ 08530
Phone: (609)397-0110
Fax: (609)397-2203

SHIP TO

FINANCE DEPARTMENT
CITY OF LAMBERTVILLE
18 YORK STREET
LAMBERTVILLE, NJ 08530

VENDOR

Vendor #: HOLIC010

HOLICONG LOCKSMITHS
& CENTRAL SECURITY, INC
PO BOX 126
HOLICONG, PA 18928-0126

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 23-01308

ORDER DATE: 09/19/23

DELIVERY DATE:

STATE CONTRACT:

VENDOR ACCT NUM:

VENDOR PHONE #: (215)794-7542

VENDOR FAX #: (215)794-0837

VENDOR EMAIL: acctsreceivable@holicongsecurity.com

REQUISITION #:

PAYMENT RECORD

CHECK NO.

DATE PAID

NOTICE: TAX EXEMPT - TAX ID: 22-6002021

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	ANNUAL FIRE INSPEC; 349 N MAIN P56101	3-01-26-310-224 BUILDINGS Cleaning & Maint of Building	127.5800	127.58
			TOTAL	127.58

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under penalties, of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any; person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

VENDOR SIGN HERE

OFFICIAL POSITION

DATE

TAX ID NO. OR SOCIAL SECURITY NO.

OFFICER'S CERTIFICATION

I, having knowledge of the facts, certify that the materials and supplies have been received or the services rendered; said certification being based on signed delivery slips or other reasonable procedures.

DEPT. HEAD

DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:

CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT
IS SIGNED BELOW

Department Head

Deputy Treasurer

City Clerk/Business Admin.



CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530
Phone: (609)397-0110
Fax: (609)397-2203

SHIP TO

MUNICIPAL COURT
CITY OF LAMBERTVILLE
25 SOUTH UNION ST
LAMBERTVILLE, NJ 08530

VENDOR

Vendor #: HOLIC010

HOLICONG LOCKSMITHS
& CENTRAL SECURITY, INC
PO BOX 126
HOLICONG, PA 18928-0126

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 23-00265-03

ORDER DATE: 02/08/23
DELIVERY DATE: 08/09/23
STATE CONTRACT:
VENDOR ACCT NUM:
VENDOR PHONE #: (215)794-7542
VENDOR FAX #: (215)794-0837
VENDOR EMAIL: acctreceiveable@holicongsecurity.com
REQUISITION #:

PAYMENT RECORD

CHECK NO.

183318

DATE PAID

PAID AUG 17 2023

NOTICE: TAX EXEMPT - TAX ID: 22-6002021

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	25 S UNION; INV R 181921	3-01-43-490-224 COURT Cleaning & Maint of Buildings	167.4000	167.40
			TOTAL	=====
				167.40

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under penalties; of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any; person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

VENDOR SIGN HERE

OFFICIAL POSITION

DATE

TAX ID NO. OR SOCIAL SECURITY NO.

OFFICER'S CERTIFICATION

I, having knowledge of the facts, certify that the materials and supplies have been received or the services rendered; said certification being based on signed delivery slips or other reasonable procedures.

DEPT. HEAD

DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:

CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

Department Head

Deputy Treasurer

City Clerk/Business Admin.

INVOICE**Holicong Security**

P.O. Box 126
Holicong, PA 18928
215-794-7542

Date 8/07/23

Please Remit Payment By: 9/06/23

Tear Off This Top Stub And Return With Payment

Page 1

City Of Lambertville
18 York Street
Lambertville, NJ 08530

City Of Lambertville Lambertville Munici
25 S Union Street
Lambertville, NJ 08530

Account No	Invoice No	P.O Number	Sales Person	Please Pay This Amount
LAM10	R 181921			167.40

Description	Tax	Amount
800 Service		12.00
Additional Area / O/C With Windows		33.00
24 Hour Automatic Test Timer		18.00
High/Low Temperature Monitoring		15.00
Open/Close Monitoring with Windows		108.00
For Period SEP 1, 2023 To NOV 30, 2023		
Reflects 10% Monitoring Discount For 3 - 5 Locations		-18.60

Payment due by September 10th
CALL US TO SET UP AUTOPAY!!!

Holicong Security

Total Charges	167.40
Sales Tax	0.00
Total Due	167.40



18 YORK ST
LAMBERTVILLE, NJ 08530
Phone: (609)397-0110
Fax: (609)397-2203

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 23-00265-03

SHIP TO

MUNICIPAL COURT
CITY OF LAMBERTVILLE
25 SOUTH UNION ST
LAMBERTVILLE, NJ 08530

VENDOR

Vendor #: HOLIC010

HOLICONG LOCKSMITHS
& CENTRAL SECURITY, INC
PO BOX 126
HOLICONG, PA 18928-0126

ORDER DATE: 02/08/23
DELIVERY DATE: 08/09/23
STATE CONTRACT:
VENDOR ACCT NUM:
VENDOR PHONE #: (215)794-7542
VENDOR FAX #: (215)794-0837
VENDOR EMAIL: acctreceivable@holicongsecurity.com
REQUISITION #:

PAYMENT RECORD

CHECK NO.

DATE PAID

NOTICE: TAX EXEMPT - TAX ID: 22-6002021

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	25 S UNION; INV R 181921	3-01-43-490-224 COURT Cleaning & Maint of Buildings	167.4000	167.40
			TOTAL	=====
				167.40

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under penalties; of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any; person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

VENDOR SIGN HERE

ACCOUNTS RECEIVABLE

8/10/23

DATE

23-2043474

TAX ID NO. OR SOCIAL SECURITY NO.

OFFICER'S CERTIFICATION

I, having knowledge of the facts, certify that the materials and supplies have been received or the services rendered; said certification being based on signed delivery slips or other reasonable procedures.

DEPT. HEAD

DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:
CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

Department Head

Deputy Treasurer

City Clerk/Business Admin.



CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530
Phone: (609)397-0110
Fax: (609)397-2203

SHIP TO

POLICE DEPARTMENT
CITY OF LAMBERTVILLE
349 NORTH MAIN STREET
LAMBERTVILLE, NJ 08530

VENDOR

Vendor #: HOLIC010

HOLICONG LOCKSMITHS
& CENTRAL SECURITY, INC
PO BOX 126
HOLICONG, PA 18928-0126

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 23-00081-03

ORDER DATE: 01/10/23

DELIVERY DATE: 07/07/23

STATE CONTRACT:

VENDOR ACCT NUM:

VENDOR PHONE #: (215)794-7542

VENDOR FAX #: (215)794-0837

VENDOR EMAIL: acctsreceivable@holicongsecurity.com

REQUISITION #:

PAYMENT RECORD

CHECK NO.

103235

DATE PAID

PAID JUL 20 2023

NOTICE: TAX EXEMPT - TAX ID: 22-6002021

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	349 N MAIN; INV R181441 PERIOD AUG 1 - OCT 31 2023	3-01-25-240-229 POLICE Other Contractual Items	96.7700	96.77
			TOTAL	96.77

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under penalties; of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any; person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

VENDOR SIGN HERE

OFFICIAL POSITION

DATE

TAX ID NO. OR SOCIAL SECURITY NO.

OFFICER'S CERTIFICATION

I, having knowledge of the facts, certify that the materials and supplies have been received or the services rendered; said certification being based on signed delivery slips or other reasonable procedures.

DEPT. HEAD

DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:

CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

Department Head

Deputy Treasurer

City Clerk/Business Admin.

Holicong Security

P.O. Box 126
Holicong, PA 18928
215-794-7542

INVOICE

Date 7/05/23

Please Remit Payment By: 7/25/23

Tear Off This Top Stub And Return With Payment

Page 1

City Of Lambertville
18 York Street
Lambertville, NJ 08530

Lambertville Police Department
349 N Main Street
Lambertville, NJ 08530

Account No	Invoice No	P.O Number	Sales Person	Please Pay This Amount
LAM08	R 181441			96.77

Description	Tax	Amount
Commercial Entrance/Exit Monitoring		89.85
For Period AUG 1, 2023 To OCT 31, 2023		
24 Hour Automatic Test Timer		18.00
800 Service		6.00
15% Special Discount for Police Departments		-17.08

We're Going GREEN. Send your email address to info@holicongsecurity.com or send it with your payment.
If you prefer paper invoices, let us know. Emails are also used for technology updates. THANKS for helping us Go GREEN.

Payment due by August 10th
We Accept Visa/MC, Discover & American Express
Holicong Security

Total Charges	96.77
Sales Tax	0.00
Total Due	96.77



18 YORK ST
LAMBERTVILLE, NJ 08530
Phone: (609)397-0110
Fax: (609)397-2203

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 23-00081-03

SHIP TO

POLICE DEPARTMENT
CITY OF LAMBERTVILLE
349 NORTH MAIN STREET
LAMBERTVILLE, NJ 08530

VENDOR

Vendor #: Holicong010

HOLICONG LOCKSMITHS
& CENTRAL SECURITY, INC
PO BOX 126
HOLICONG, PA 18928-0126

ORDER DATE: 01/10/23

DELIVERY DATE: 07/07/23

STATE CONTRACT:

VENDOR ACCT NUM:

VENDOR PHONE #: (215)794-7542

VENDOR FAX #: (215)794-0837

VENDOR EMAIL: acctsreceivable@holicongsecurity.com

REQUISITION #:

PAYMENT RECORD

CHECK NO.

DATE PAID

NOTICE: TAX EXEMPT - TAX ID: 22-6002021

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	349 N MAIN; INV R181441 PERIOD AUG 1 - OCT 31 2023	3-01-25-240-229 POLICE Other Contractual Items	96.7700	96.77
			TOTAL	=====
				96.77

CLAIMANT'S CERTIFICATION & DECLARATION

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VENDOR SIGN HERE

OFFICIAL POSITION

DATE

TAX ID NO. OR SOCIAL SECURITY NO.

OFFICER'S CERTIFICATION

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DEPT. HEAD

DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:

CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

Department Head

Deputy Treasurer

City Clerk/Business Admin.



CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530
Phone: (609)397-0110
Fax: (609)397-2203

SHIP TO

MUNICIPAL COURT
CITY OF LAMBERTVILLE
25 SOUTH UNION ST
LAMBERTVILLE, NJ 08530

VENDOR

Vendor #: HOLIC010

HOLICONG LOCKSMITHS
& CENTRAL SECURITY, INC
PO BOX 126
HOLICONG, PA 18928-0126

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 23-00265-02

ORDER DATE: 02/08/23

DELIVERY DATE: 05/12/23

STATE CONTRACT:

VENDOR ACCT NUM:

VENDOR PHONE #: (215)794-7542

VENDOR FAX #: (215)794-0837

VENDOR EMAIL: acctsreceivable@holicongsecurity.com

REQUISITION #:

PAYMENT RECORD

CHECK NO.

103045

DATE PAID

PAID MAY 18 2023

NOTICE: TAX EXEMPT - TAX ID: 22-6002021

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	25 S UNION; INV R 180773 PERIOD JUN 1 - AUG 31 2023	3-01-43-490-224 COURT Cleaning & Maint of Buildings	167.4000	167.40
			TOTAL	=====
				167.40

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under penalties, of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any; person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

VENDOR SIGN HERE

OFFICIAL POSITION

DATE

TAX ID NO. OR SOCIAL SECURITY NO.

OFFICER'S CERTIFICATION

I, having knowledge of the facts, certify that the materials and supplies have been received or the services rendered; said certification being based on signed delivery slips or other reasonable procedures.

DEPT. HEAD

DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:

CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

Department Head

Deputy Treasurer

City Clerk/Business Admin.

Holicong Security

P.O. Box 126
Holicong, PA 18928
215-794-7542

INVOICE

Date 5/05/23

Please Remit Payment By:

6/04/23

Tear Off This Top Stub And Return With Payment

Page 1

City Of Lambertville
18 York Street
Lambertville, NJ 08530

City Of Lambertville Lambertville Municipi
25 S Union Street
Lambertville, NJ 08530

Account No	Invoice No	P.O Number	Sales Person	Please Pay This Amount
LAM10	R 180773			167.40

Description	Tax	Amount
800 Service		12.00
Additional Area / O/C With Windows		33.00
24 Hour Automatic Test Timer		18.00
High/Low Temperature Monitoring		15.00
Open/Close Monitoring with Windows		108.00
For Period JUN 1, 2023 To AUG 31, 2023		
Reflects 10% Monitoring Discount For 3 - 5 Locations		-18.60

PAPERLESS BILLING NOW AVAILABLE! SIGN UP

Holicong Security

Total Charges	167.40
Sales Tax	0.00
Total Due	167.40



18 YORK ST
LAMBERTVILLE, NJ 08530
Phone: (609)397-0110
Fax: (609)397-2203

SHIP TO

MUNICIPAL COURT
CITY OF LAMBERTVILLE
25 SOUTH UNION ST
LAMBERTVILLE, NJ 08530

VENDOR

Vendor #: HOLIC010

HOLICONG LOCKSMITHS
& CENTRAL SECURITY, INC
PO BOX 126
HOLICONG, PA 18928-0126

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 23-00265-02

ORDER DATE: 02/08/23
DELIVERY DATE: 05/12/23
STATE CONTRACT:
VENDOR ACCT NUM:
VENDOR PHONE #: (215)794-7542
VENDOR FAX #: (215)794-0837
VENDOR EMAIL: acctsreceivable@holicongsecurity.cor
REQUISITION #:

PAYMENT RECORD

CHECK NO.

DATE PAID

QUANTITY

1.00

DESCRIPTION

25 S UNION; INV R 180773
PERIOD JUN 1 - AUG 31 2023

NOTICE: TAX EXEMPT - TAX ID: 22-6002021

ACCOUNT NO

3-01-43-490-224
COURT Cleaning & Maint of Buildings

UNIT PRICE

167.4000

TOTAL

167.40

TOTAL

167.40

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under penalties of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

VENDOR SIGN HERE

OFFICIAL POSITION

DATE

TAX ID NO. OR SOCIAL SECURITY NO.

OFFICER'S CERTIFICATION

I, having knowledge of the facts, certify that the materials and supplies have been received or the services rendered; said certification being based on signed delivery slips or other reasonable procedures.

DEPT. HEAD

DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS
VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:

CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT
IS SIGNED BELOW

Department Head

Deputy Treasurer

City Clerk/Business Admin.



CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530
Phone: (609)397-0110
Fax: (609)397-2203

SHIP TO

FINANCE DEPARTMENT
CITY OF LAMBERTVILLE
18 YORK STREET
LAMBERTVILLE, NJ 08530

VENDOR

Vendor #: HOLIC010

HOLICONG LOCKSMITHS
& CENTRAL SECURITY, INC
PO BOX 126
HOLICONG, PA 18928-0126

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 23-00707

ORDER DATE: 05/12/23
DELIVERY DATE: 05/12/23
STATE CONTRACT:
VENDOR ACCT NUM:
VENDOR PHONE #: (215)794-7542
VENDOR FAX #: (215)794-0837
VENDOR EMAIL: acctreceivable@holicongsecurity.com
REQUISITION #:

PAYMENT RECORD

CHECK NO.

DATE PAID : **PAID MAY 18 2023**

NOTICE: TAX EXEMPT - TAX ID: 22-6002021

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	18 YORK FIRE MONITOR; R180448 PERIOD JUL 1 - SEP 30 2023	3-01-26-310-299 BUILDINGS Misc & Other Admin Costs	88.3500	88.35
			TOTAL	88.35

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under penalties; of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any; person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

VENDOR SIGN HERE

OFFICIAL POSITION

DATE

TAX ID NO. OR SOCIAL SECURITY NO.

OFFICER'S CERTIFICATION

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DEPT. HEAD

DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:

CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

Department Head

Deputy Treasurer

City Clerk/Business Admin.

Holicong Security

P.O. Box 126
Holicong, PA 18928
215-794-7542

INVOICE

Date 5/05/23

Please Remit Payment By: 5/25/23

Tear Off This Top Stub And Return With Payment

Page 1

City Of Lambertville
18 York Street
Lambertville, NJ 08530

City Of Lambertville
18 York Street
Lambertville, NJ 08530

Account No	Invoice No	P.O Number	Sales Person	Please Pay This Amount
CIT01	R 180448			88.35

Description	Tax	Amount
Fire System Monitoring		93.00
For Period JUL 1, 2023 To SEP 30, 2023		
Reflects 5% Monitoring Discount For 2 Locations		-4.65

PAPERLESS BILLING NOW AVAILABLE! SIGN UP

Holicong Security

Total Charges	88.35
Sales Tax	0.00
Total Due	88.35



CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530
Phone: (609)397-0110
Fax: (609)397-2203

SHIP TO

FINANCE DEPARTMENT
CITY OF LAMBERTVILLE
18 YORK STREET
LAMBERTVILLE, NJ 08530

VENDOR

Vendor #: HOLIC010

HOLICONG LOCKSMITHS
& CENTRAL SECURITY, INC
PO BOX 126
HOLICONG, PA 18928-0126

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 23-00707

ORDER DATE: 05/12/23
DELIVERY DATE: 05/12/23
STATE CONTRACT:
VENDOR ACCT NUM:
VENDOR PHONE #: (215)794-7542
VENDOR FAX #: (215)794-0837
VENDOR EMAIL: acctreceivable@holicongsecurity.com
REQUISITION #:

PAYMENT RECORD

CHECK NO.

DATE PAID

NOTICE: TAX EXEMPT - TAX ID: 22-6002021

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	18 YORK FIRE MONITOR; R180448 PERIOD JUL 1 - SEP 30 2023	3-01-26-310-299 BUILDINGS Misc & Other Admin Costs	88.3500	88.35
			TOTAL	88.35

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under penalties; of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any; person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

VENDOR SIGN HERE

OFFICIAL POSITION

DATE

TAX ID NO. OR SOCIAL SECURITY NO.

OFFICER'S CERTIFICATION

I, having knowledge of the facts, certify that the materials and supplies have been received or the services rendered; said certification being based on signed delivery slips or other reasonable procedures.

DEPT. HEAD

DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:

CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT
IS SIGNED BELOW

Department Head

Deputy Treasurer

City Clerk/Business Admin.



CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530
Phone: (609)397-0110
Fax: (609)397-2203

SHIP TO

POLICE DEPARTMENT
CITY OF LAMBERTVILLE
349 NORTH MAIN STREET
LAMBERTVILLE, NJ 08530

VENDOR

Vendor #: HOLIC010

HOLICONG LOCKSMITHS
& CENTRAL SECURITY, INC
PO BOX 126
HOLICONG, PA 18928-0126

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 23-00081-02

ORDER DATE: 01/10/23

DELIVERY DATE: 04/05/23

STATE CONTRACT:

VENDOR ACCT NUM:

VENDOR PHONE #: (215)794-7542

VENDOR FAX #: (215)794-0837

VENDOR EMAIL: acctreceivable@holicongsecurity.com

REQUISITION #:

PAYMENT RECORD

CHECK NO.

DATE PAID

102947
PAID APR 20 2023

NOTICE: TAX EXEMPT - TAX ID: 22-6002021

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	349 N MAIN; INV R180019	3-01-25-240-229	96.7700	96.77
		POLICE Other Contractual Items		
			TOTAL	96.77

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under penalties; of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any; person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

VENDOR SIGN HERE

OFFICIAL POSITION

DATE

TAX ID NO. OR SOCIAL SECURITY NO.

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DEPT. HEAD

DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:
CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

Department Head

Deputy Treasurer

City Clerk/Business Admin.

Holicon Security

P O Box 126
Holicon PA 18928
215-794-7542

INVOICE

Please Remit Payment By: Date 4/05/23
4/25/23

Tear Off This Top Stub And Return With Payment

Page 1

City Of Lambertville
18 York Street
Lambertville, NJ 08530

Lambertville Police Department
349 N Main Street
Lambertville, NJ 08530

Account No	Invoice No	P.O Number	Sales Person	Please Pay This Amount
LAM08	R 180019			96.77

Description	Tax	Amount
Commercial Entrance/Exit Monitoring For Period MAY 1, 2023 To JUL 31, 2023		89.85
24 Hour Automatic Test Timer		18.00
800 Service		6.00
15% Special Discount for Police Departments		-17.08

We Accept Visa/MC, Discover & American Express
We appreciate your business!
Holicon Security

Total Charges	96.77
Sales Tax	0.00
Total Due	96.77



CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530
Phone: (609)397-0110
Fax: (609)397-2203

SHIP TO

POLICE DEPARTMENT
CITY OF LAMBERTVILLE
349 NORTH MAIN STREET
LAMBERTVILLE, NJ 08530

VENDOR

Vendor #: Holicong010

HOLICONG LOCKSMITHS
& CENTRAL SECURITY, INC
PO BOX 126
HOLICONG, PA 18928-0126

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 23-00081-02

ORDER DATE: 01/10/23
DELIVERY DATE: 04/05/23
STATE CONTRACT:
VENDOR ACCT NUM:
VENDOR PHONE #: (215)794-7542
VENDOR FAX #: (215)794-0837
VENDOR EMAIL: acctreceivable@holicongsecurity.com
REQUISITION #:

PAYMENT RECORD

CHECK NO.

DATE PAID

NOTICE: TAX EXEMPT - TAX ID: 22-6002021

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	349 N MAIN; INV R180019	3-01-25-240-229 POLICE Other Contractual Items	96.7700	96.77
			TOTAL	=====
				96.77

CLAIMANT'S CERTIFICATION & DECLARATION

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VENDOR SIGN HERE

OFFICIAL POSITION

DATE

TAX ID NO. OR SOCIAL SECURITY NO.

OFFICER'S CERTIFICATION

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DEPT. HEAD DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:
CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

Department Head

Deputy Treasurer

City Clerk/Business Admin.



CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530
Phone: (609)397-0110
Fax: (609)397-2203

SHIP TO

FINANCE DEPARTMENT
CITY OF LAMBERTVILLE
18 YORK STREET
LAMBERTVILLE, NJ 08530

VENDOR

Vendor #: Holic010

HOLICONG LOCKSMITHS
& CENTRAL SECURITY, INC
PO BOX 126
HOLICONG, PA 18928-0126

e 2/22

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 23-00315

ORDER DATE: 02/22/23

DELIVERY DATE:

STATE CONTRACT:

VENDOR ACCT NUM:

VENDOR PHONE #: (215)794-7542

VENDOR FAX #: (215)794-0837

VENDOR EMAIL: acctreceiveable@holicongsecurity.com

REQUISITION #:

PAYMENT RECORD

CHECK NO.

162858

DATE PAID

PAID MAR 16 2023

NOTICE: TAX EXEMPT - TAX ID: 22-6002021

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	18 YORK ST; INV P54819	3-01-26-310-224	253.0000	253.00
		BUILINGS Cleaning & Maint of Building		
1.00	25 S. UNION ST; INV P54818	3-01-26-310-224	203.8800	203.88
		BUILINGS Cleaning & Maint of Building		
	ANNUAL FIRE INSPECTION			
			TOTAL	=====
				456.88

CLAIMANT'S CERTIFICATION & DECLARATION

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VENDOR SIGN HERE

OFFICIAL POSITION

DATE

TAX ID NO. OR SOCIAL SECURITY NO.

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DEPT. HEAD

DATE

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CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530

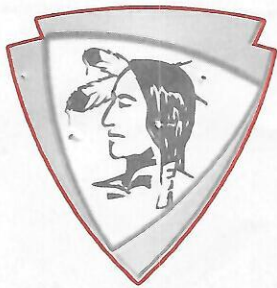
APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

Department Head

Deputy Treasurer

City Clerk/Business Admin.



HOLICONG

LOCKSMITHS AND CENTRAL SECURITY INC.

P.O. BOX 126 • HOLICONG, PENNSYLVANIA 18928
(215) 794-7542 • FAX: (215) 794-0837

INVOICE

DATE 2/09/23

TO:

City Of Lambertville
18 York Street
Lambertville, NJ 08530

Job Site:

City Of Lambertville
18 York Street
Lambertville, NJ 08530

RETURN TOP PORTION WITH YOUR REMITTANCE

Page 1

ACCOUNT NO.

INVOICE NO.

PLEASE PAY THIS AMOUNT

CIT01

P 54819

Lester Myers

253.63

PLEASE TEAR HERE • PLEASE TEAR HERE • PLEASE TEAR HERE • PLEASE TEAR HERE • PLEASE TEAR HERE • PLEASE TEAR HERE • PLEASE TEAR HERE • PLEASE TEAR HERE • PLEASE TEAR HERE

DESCRIPTION

AMOUNT

2/9/23 - Annual Fire Inspection; tested all known fire devices and communications. Tagged panel. Completed NFPA fire inspection certificate; copy enclosed. (covers first hour)

179.00

45 additional minutes labor @ \$99.50/hour (1 tech)

74.63

Payment Due Upon Receipt

SUB TOTAL

253.63

TAX

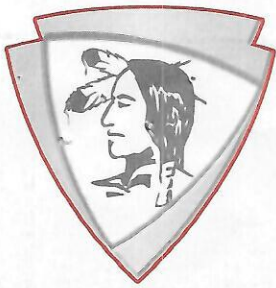
0.00

TOTAL DUE

253.63

Holicong Security Acct#: CIT01 INV54819

P.O. BOX 126 • HOLICONG, PA 18928 • 215-794-7542



HOLICONG

LOCKSMITHS AND CENTRAL SECURITY INC.

P.O. BOX 126 • HOLICONG, PENNSYLVANIA 18928
(215) 794-7542 • FAX: (215) 794-0837

INVOICE

DATE 2/09/23

TO:

City Of Lambertville
18 York Street
Lambertville, NJ 08530

Job Site:

City Of Lambertville Lambertville Municipi
25 S Union Street
Lambertville, NJ 08530

RETURN TOP PORTION WITH YOUR REMITTANCE

Page 1

ACCOUNT NO.

INVOICE NO.

PLEASE PAY THIS AMOUNT

LAM10

P 54818

Lester Myers

203.88

PLEASE TEAR HERE • PLEASE TEAR HERE • PLEASE TEAR HERE • PLEASE TEAR HERE • PLEASE TEAR HERE • PLEASE TEAR HERE • PLEASE TEAR HERE • PLEASE TEAR HERE • PLEASE TEAR HERE

DESCRIPTION

AMOUNT

2/9/23 - Annual Fire Inspection; tested all known fire devices and communications. Tagged panel. Completed NFPA fire inspection certificate; copy enclosed. (covers first hour)

179.00

15 additional minutes labor @ \$99.50/hour (1 tech)

24.88

Payment Due Upon Receipt

SUB TOTAL

203.88

TAX

0.00

TOTAL DUE

203.88

Holicong Security Acct#: LAM10 INV54818

P.O. BOX 126 • HOLICONG, PA 18928 • 215-794-7542



CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530
Phone: (609)397-0110
Fax: (609)397-2203

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 23-00315

SHIP TO

FINANCE DEPARTMENT
CITY OF LAMBERTVILLE
18 YORK STREET
LAMBERTVILLE, NJ 08530

VENDOR

Vendor #: HOLIC010

HOLICONG LOCKSMITHS
& CENTRAL SECURITY, INC
PO BOX 126
HOLICONG, PA 18928-0126

ORDER DATE: 02/22/23

DELIVERY DATE:

STATE CONTRACT:

VENDOR ACCT NUM:

VENDOR PHONE #: (215)794-7542

VENDOR FAX #: (215)794-0837

VENDOR EMAIL: acctsreceivable@holicongsecurity.com

REQUISITION #:

PAYMENT RECORD

CHECK NO.

DATE PAID

NOTICE: TAX EXEMPT - TAX ID: 22-6002021

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	18 YORK ST; INV P54819	3-01-26-310-224	253.0000	253.00
		BUILDINGS Cleaning & Maint of Building		
1.00	25 S. UNION ST; INV P54818	3-01-26-310-224	203.8800	203.88
		BUILDINGS Cleaning & Maint of Building		
	ANNUAL FIRE INSPECTION			
			TOTAL	=====
				456.88

CLAIMANT'S CERTIFICATION & DECLARATION

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Rosemary McNary
VENDOR SIGN HERE

Accts Receivable
OFFICIAL POSITION

2/22/23
DATE

23 204 3474

OFFICER'S CERTIFICATION

I, having knowledge of the facts, certify that the materials and supplies have been received or the services rendered; said certification being based on signed delivery slips or other reasonable procedures.

DEPT. HEAD DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS
VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:
CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT
IS SIGNED BELOW

Department Head

Deputy Treasurer

City Clerk/Business Admin.



HOLICONG Security

1968 Holicong Road, PO Box 126 Holicong, PA 18928
215-794-7542 www.holicongsecurity.com

INSPECTION AND TESTING FORM

Date: 2-9-23 Time: 11:50 - 1:35

SERVICE ORGANIZATION

Name: Holicong Locksmith & Central Security
Address: 1968 Holicong Road Holicong, PA. 18928
Representative: _____
License No.: P00976/181212
Telephone: 215-794-7542

MONITORING ENTITY

Contact: Holicong Security
Telephone: 1-800-639-7019
Monitoring Account Ref. No.: 4914

TYPE TRANSMISSION

☐ McCulloh ☐ Multiplex ☒ Digital
☐ Reverse Priority ☐ RF
☐ Other (Specify) _____

Control Unit Manufacturer: EST
Model No.: 1064
Circuit Styles: A
Number of Circuits: _____
Software Rev.: _____
Last Date System Had Any Service Performed: _____
Last Date That Any Software or Configuration Was Revised: _____

PROPERTY NAME (USER)

Name: City of Lambertville
Address: 18 York St
Owner Contact: _____
Telephone: 609-528-7102
528

APPROVING AGENCY

Contact: _____
Telephone: _____

SERVICE

☐ Weekly ☐ Monthly ☐ Quarterly
☐ Semiannually ☒ Annually
☐ Other (Specify) _____

ALARM-INITIATING DEVICES AND CIRCUIT INFORMATION

Quantity of Devices Installed	Circuit Style	Quantity of Devices Tested	
<u>5</u>	<u>A</u>	<u>5</u>	Manual Fire Alarm Boxes
			Ion Detectors
<u>9</u>	<u>A</u>	<u>9</u>	Photo Detectors
			Duct Detectors
			Heat Detectors
			Waterflow Switches
			Supervisory Switches
			Other (Specify): _____

Alarm verification feature is ☐ disabled ☒ enabled

ALARM NOTIFICATION APPLIANCES AND CIRCUIT INFORMATION

Quantity of Appliances Installed	Circuit Style	Quantity of Appliances Tested	
			Bells
			Horns
			Chimes
			Strobes
			Speakers
<u>9</u>	<u>A</u>	<u>9</u>	Other (Specify): <u>Horn Strobe</u>

No. of alarm notification appliance circuits: _____

Are circuits monitored for integrity? ☒ Yes ☐ No

SUPERVISORY SIGNAL-INITIATING DEVICES AND CIRCUIT INFORMATION

Quantity of Devices Installed	Circuit Style	Quantity of Devices Tested	
			Building Temp.
			Site Water Temp.
			Site Water Level
			Fire Pump Power
			Fire Pump Running
			Fire Pump Auto Position
			Fire Pump or Pump Controller Trouble
			Fire Pump Running
			Generator in Auto Position
			Generator or Controller Trouble
			Switch Transfer
			Generator Engine Running
			Other (Specify): _____

EMERGENCY COMMUNICATIONS EQUIPMENT

Phone Set
 Phone Jacks
 Off-Hook Indicator
 Amplifier(s)
 Tone Generator(s)
 Call-in Signal
 System Performance

Visual

Functional

Comments

☒
☒
☐
☐
☐
☒
☒

☒
☒
☐
☐
☐
☒
☒

COMBINATION SYSTEMS

Fire Extinguisher Monitoring Device/System
 Carbon Monoxide Detector System
 (Specify) _____

Visual

Device Operation

Simulated Operation

☐
☐
☐

☐
☐
☐

☐
☐
☐

INTERFACE EQUIPMENT

(Specify) _____
 (Specify) _____
 (Specify) _____

☐
☐
☐

☐
☐
☐

☐
☐
☐

SPECIAL HAZARD SYSTEMS

(Specify) _____
 (Specify) _____
 (Specify) _____

☐
☐
☐

☐
☐
☐

☐
☐
☐

Special Procedures:

Comments:

SUPERVISING STATION MONITORING

Alarm Signal
 Alarm Restoration
 Trouble Signal
 Trouble Signal Restoration
 Supervisory Signal
 Supervisory Restoration

Yes
☒
☒
☒
☒
☒
☒

No
☐
☐
☐
☐
☐
☐

Time

1:05

Comments

SYSTEM TESTS AND INSPECTIONS

TYPE	Visual	Functional	Comments
Control Unit	☒	☒	
Interface Equipment	☒	☒	
Lamps/LEDs	☐	☐	
Fuses	☐	☐	
Primary Power Supply	☒	☒	
Trouble Signals	☒	☒	
Disconnect Switches	☐	☐	
Ground-Fault Monitoring	☐	☐	

SECONDARY POWER

TYPE	Visual	Functional	Comments
Battery Condition	☒		
Load Voltage		☐	
Discharge Test		☐	
Charger Test		☐	
Specific Gravity		☐	
TRANSIENT SUPPRESSORS	☐		
REMOTE ANNUNCIATORS	☐	☐	
NOTIFICATION APPLIANCES			
Audible	☒	☒	
Visible	☒	☒	
Speakers	☐	☐	
Voice Clarity		☐	

INITIATING AND SUPERVISORY DEVICE TESTS AND INSPECTIONS

Loc. & S/N	Device Type	Visual Check	Functional Test	Factory Setting	Measured Setting	Pass	Fail
		☐	☐			☐	☐
		☐	☐			☐	☐
		☐	☐			☐	☐
		☐	☐			☐	☐
		☐	☐			☐	☐
		☐	☐			☐	☐

Comments:

SIGNALING LINE CIRCUITS

Quantity and style of signaling line circuits connected to system (see NFPA 72®, Table 6.6.1)

Quantity _____ Style(s) _____

SYSTEM POWER SUPPLIES

(a) Primary (Main): Nominal Voltage 110 Amps 1.25

Overcurrent Protection: Type Circuit Breaker Amps _____

Location (of Primary Supply Panelboard): Right of Panel

Disconnecting Means Location: Circuit Breaker

(b) Secondary (Standby):

12 V Storage Battery: Amp-Hr Rating 7aH

Calculated capacity in 14aH Amp-Hrs to operate system for 24 hours

Engine-driven generator dedicated to fire alarm system: _____

Location of fuel storage: _____

TYPE BATTERY

☐ Dry Cell

☐ Lead-Acid

☐ Nickel-Cadmium

☐ Other (Specify): _____

☒ Sealed Lead Acid

(c) Emergency or standby system used as a backup to primary power supply, instead of using a secondary power supply:

Emergency system described in NFPA 70®, Article 700

Legally required standby described in NFPA 70®, Article 701

Optional standby system described in NFPA 70®, Article 702, which also meets the performance requirements of Article 700 or 701

PRIOR TO ANY TESTING

NOTIFICATIONS ARE MADE

Monitoring Entity

Building Occupants

Building Management

Other (Specify)

AHJ Notified of Any Impairments

Yes

No

Who

Time

☒

☐

HLCS

11:50

☒

☐

Staff

↓

☒

☐

Management

☐

☐

☐

☐

NOTIFICATIONS THAT TESTING IS COMPLETE

	Yes	No	Who	Time
Building Management	☒	☐	Management	
Monitoring Agency	☒	☐	HLCS	
Building Occupants	☒	☐	Staff	
Other (Specify)	☐	☐		

The following did not operate correctly:

System restored to normal operation:

Date: 2-9-23 Time:

THIS TESTING WAS PERFORMED IN ACCORDANCE WITH APPLICABLE NFPA STANDARDS

Name of Inspector: Ryan McAfee Date: 2-9-23 Time:

Signature: Ryan McAfee

Name of Owner or Representative: Date: Time:

Signature:



CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530
Phone: (609)397-0110
Fax: (609)397-2203

SHIP TO

FINANCE DEPARTMENT
CITY OF LAMBERTVILLE
18 YORK STREET
LAMBERTVILLE, NJ 08530

VENDOR

Vendor #: HOLIC010

HOLICONG LOCKSMITHS
& CENTRAL SECURITY, INC
PO BOX 126
HOLICONG, PA 18928-0126

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 23-00390

ORDER DATE: 03/08/23

DELIVERY DATE: 03/08/23

STATE CONTRACT:

VENDOR ACCT NUM:

VENDOR PHONE #: (215)794-7542

VENDOR FAX #: (215)794-0837

VENDOR EMAIL: acctreceivable@holicongsecurity.com

REQUISITION #:

PAYMENT RECORD

CHECK NO.

102858

DATE PAID

PAID MAR 16 2023

NOTICE: TAX EXEMPT - TAX ID: 22-6002021

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	18 YORK FIRE MONITOR; R179377 PERIOD MAR 1 - JUN 30 2023	3-01-26-310-299 BUILDINGS Misc & Other Admin Costs	88.3500	88.35
			TOTAL	88.35

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under penalties; of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any; person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

VENDOR SIGN HERE

OFFICIAL POSITION

DATE

TAX ID NO. OR SOCIAL SECURITY NO.

OFFICER'S CERTIFICATION

I, having knowledge of the facts, certify that the materials and supplies have been received or the services rendered; said certification being based on signed delivery slips or other reasonable procedures.

DEPT. HEAD

DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:
CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

Department Head

Deputy Treasurer

City Clerk/Business Admin.

Holicong Security

P.O. Box 126
Holicong, PA 18928
215-794-7542

INVOICE

Please Remit Payment By:

Date 3/06/23
3/26/23

Tear Off This Top Stub And Return With Payment

Page 1

City Of Lambertville
18 York Street
Lambertville, NJ 08530

City Of Lambertville
18 York Street
Lambertville, NJ 08530

Account No	Invoice No	P.O Number	Sales Person	Please Pay This Amount
CIT01	R 179377			88.35

Description

	Tax	Amount
Fire System Monitoring		93.00
For Period APR 1, 2023 To JUN 30, 2023		
Reflects 5% Monitoring Discount For 2 Locations		-4.65

Payment due by April 10th
Payment Due Upon Receipt
Holicong Security

Total Charges	88.35
Sales Tax	0.00
Total Due	88.35



18 YORK ST
LAMBERTVILLE, NJ 08530
Phone: (609)397-0110
Fax: (609)397-2203

SHIP TO

FINANCE DEPARTMENT
CITY OF LAMBERTVILLE
18 YORK STREET
LAMBERTVILLE, NJ 08530

VENDOR

Vendor #: HOLIC010

HOLICONG LOCKSMITHS
& CENTRAL SECURITY, INC
PO BOX 126
HOLICONG, PA 18928-0126

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 23-00390

ORDER DATE: 03/08/23

DELIVERY DATE: 03/08/23

STATE CONTRACT:

VENDOR ACCT NUM:

VENDOR PHONE #: (215)794-7542

VENDOR FAX #: (215)794-0837

VENDOR EMAIL: acctsreceivable@holicongsecurity.com

REQUISITION #:

PAYMENT RECORD

CHECK NO.

DATE PAID

NOTICE: TAX EXEMPT - TAX ID: 22-6002021

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	18 YORK FIRE MONITOR; R179377 PERIOD MAR 1 - JUN 30 2023	3-01-26-310-299 BUILDINGS Misc & Other Admin Costs	88.3500	88.35
			TOTAL	=====
				88.35

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under penalties, of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any; person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

VENDOR SIGN HERE

OFFICIAL POSITION

DATE

TAX ID NO. OR SOCIAL SECURITY NO.

OFFICER'S CERTIFICATION

I, having knowledge of the facts, certify that the materials and supplies have been received or the services rendered; said certification being based on signed delivery slips or other reasonable procedures.

DEPT. HEAD

DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:

CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

Department Head

Deputy Treasurer

City Clerk/Business Admin.



CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530
Phone: (609)397-0110
Fax: (609)397-2203

SHIP TO

MUNICIPAL COURT
CITY OF LAMBERTVILLE
25 SOUTH UNION ST
LAMBERTVILLE, NJ 08530

VENDOR

Vendor #: Holicong010

HOLICONG LOCKSMITHS
& CENTRAL SECURITY, INC
PO BOX 126
HOLICONG, PA 18928-0126

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 23-00265-01

ORDER DATE: 02/08/23

DELIVERY DATE: 02/08/23

STATE CONTRACT:

VENDOR ACCT NUM:

VENDOR PHONE #: (215)794-7542

VENDOR FAX #: (215)794-0837

VENDOR EMAIL: acctsreceivable@holicongsecurity.com

REQUISITION #:

PAYMENT RECORD

CHECK NO.

DATE PAID

102184
PAID FEB 16 2023

NOTICE: TAX EXEMPT - TAX ID: 22-6002021

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	25 S UNION; INV R 178998 PERIOD: MAR 1 - MAY 31 2023	3-01-43-490-224 COURT Cleaning & Maint of Buildings	167.4000	167.40
			TOTAL	=====
				167.40

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under penalties; of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any; person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

VENDOR SIGN HERE

OFFICIAL POSITION

DATE

TAX ID NO. OR SOCIAL SECURITY NO.

OFFICER'S CERTIFICATION

I, having knowledge of the facts, certify that the materials and supplies have been received or the services rendered; said certification being based on signed delivery slips or other reasonable procedures.

DEPT. HEAD

DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:

CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

Department Head

Deputy Treasurer

City Clerk/Business Admin.

Holicong Security

P.O. Box 126
Holicong, PA 18928
215-794-7542

INVOICE

Date 2/06/23

Please Remit Payment By: 3/08/23

Tear Off This Top Stub And Return With Payment

Page 1

City Of Lambertville
18 York Street
Lambertville, NJ 08530

City Of Lambertville Lambertville Municipi
25 S Union Street
Lambertville, NJ 08530

Account No	Invoice No	P.O Number	Sales Person	Please Pay This Amount
LAM10	R 178998			167.40

Description	Tax	Amount
800 Service		12.00
Additional Area / O/C With Windows		33.00
24 Hour Automatic Test Timer		18.00
High/Low Temperature Monitoring		15.00
Open/Close Monitoring with Windows		108.00
For Period MAR 1, 2023 To MAY 31, 2023		
Reflects 10% Monitoring Discount For 3 - 5 Locations		-18.60

Payment due by March 10th

We Accept Visa/MC, Discover & American Express

Holicong Security

Total Charges	167.40
Sales Tax	0.00
Total Due	167.40



CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530
Phone: (609)397-0110
Fax: (609)397-2203

SHIP TO

MUNICIPAL COURT
CITY OF LAMBERTVILLE
25 SOUTH UNION ST
LAMBERTVILLE, NJ 08530

VENDOR

Vendor #: HOLIC010

HOLICONG LOCKSMITHS
& CENTRAL SECURITY, INC
PO BOX 126
HOLICONG, PA 18928-0126

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 23-00265-01

ORDER DATE: 02/08/23

DELIVERY DATE: 02/08/23

STATE CONTRACT:

VENDOR ACCT NUM:

VENDOR PHONE #: (215)794-7542

VENDOR FAX #: (215)794-0837

VENDOR EMAIL: acctsreceivable@holicongsecurity.com

REQUISITION #:

PAYMENT RECORD

CHECK NO.

DATE PAID

NOTICE: TAX EXEMPT - TAX ID: 22-6002021

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	25 S UNION; INV R 178998 PERIOD: MAR 1 - MAY 31 2023	3-01-43-490-224 COURT Cleaning & Maint of Buildings	167.4000	167.40
			TOTAL	=====
				167.40

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under penalties; of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any; person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

VENDOR SIGN HERE

OFFICIAL POSITION

DATE

TAX ID NO. OR SOCIAL SECURITY NO.

OFFICER'S CERTIFICATION

I, having knowledge of the facts, certify that the materials and supplies have been received or the services rendered; said certification being based on signed delivery slips or other reasonable procedures.

DEPT. HEAD

DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:

CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

Department Head

Deputy Treasurer

City Clerk/Business Admin.



CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530
Phone: (609)397-0110
Fax: (609)397-2203

SHIP TO

FINANCE DEPARTMENT
CITY OF LAMBERTVILLE
18 YORK STREET
LAMBERTVILLE, NJ 08530

VENDOR

Vendor #: HOLIC010

HOLICONG LOCKSMITHS
& CENTRAL SECURITY, INC
PO BOX 126
HOLICONG, PA 18928-0126

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 23-00034

ORDER DATE: 01/04/23
DELIVERY DATE: 01/04/23
STATE CONTRACT:
VENDOR ACCT NUM:
VENDOR PHONE #: (215)794-7542
VENDOR FAX #: (215)794-0837
VENDOR EMAIL: acctsreceivable@holicongsecurity.com
REQUISITION #:

PAYMENT RECORD

CHECK NO.

DATE PAID

102674
PAID JAN 19 2023

NOTICE: TAX EXEMPT - TAX ID: 22-6002021

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	18 YORK FIRE MONITOR; R177840 PERIOD JAN 1 - MAR 31 2023	3-01-26-310-299 BUILDINGS Misc & Other Admin Costs	88.3500	88.35
			TOTAL	88.35

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under penalties; of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any; person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

VENDOR SIGN HERE

OFFICIAL POSITION

DATE

TAX ID NO. OR SOCIAL SECURITY NO.

OFFICER'S CERTIFICATION

I, having knowledge of the facts, certify that the materials and supplies have been received or the services rendered; said certification being based on signed delivery slips or other reasonable procedures.

DEPT. HEAD

DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:

CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

Department Head

Deputy Treasurer

City Clerk/Business Admin.

Holicong Security

P.O. Box 126
Holicong, PA 18928
215-794-7542

INVOICE

Date 12/06/22

Please Remit Payment By: 12/26/22

Tear Off This Top Stub And Return With Payment

Page 1

City Of Lambertville
18 York Street
Lambertville, NJ 08530

City Of Lambertville
18 York Street
Lambertville, NJ 08530

Account No	Invoice No	P.O Number	Sales Person	Please Pay This Amount
CIT01	R 177840			88.35

Description	Tax	Amount
Fire System Monitoring		93.00
For Period JAN 1, 2023 To MAR 31, 2023		
Reflects 5% Monitoring Discount For 2 Locations		-4.65

Payment due by January 10th

HAPPY HOLIDAYS!

Holicong Security

Total Charges	88.35
Sales Tax	0.00
Total Due	88.35



CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530
Phone: (609)397-0110
Fax: (609)397-2203

SHIP TO

CITY CLERK
CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530

VENDOR

Vendor #: Holicong010

HOLICONG LOCKSMITHS
& CENTRAL SECURITY, INC
PO BOX 126
HOLICONG, PA 18928-0126

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 23-00034

ORDER DATE: 01/04/23
DELIVERY DATE: 01/04/23
STATE CONTRACT:
VENDOR ACCT NUM:
VENDOR PHONE #: (215)794-7542
VENDOR FAX #: (215)794-0837
VENDOR EMAIL: acctreceivable@holicongsecurity.com
REQUISITION #:

PAYMENT RECORD

CHECK NO.

DATE PAID

NOTICE: TAX EXEMPT - TAX ID: 22-6002021

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	18 YORK FIRE MONITOR; R177840 PERIOD JAN 1 - MAR 31 2023	3-01-26-310-299 BUILDINGS Misc & Other Admin Costs	88.3500	88.35
			TOTAL	=====
				88.35

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under penalties; of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any; person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

Rosemary McNamara
VENDOR SIGN HERE

Account Payable 1/23/22
OFFICIAL POSITION DATE

23-204-3474

TAX ID NO. OR SOCIAL SECURITY NO.

OFFICER'S CERTIFICATION

I, having knowledge of the facts, certify that the materials and supplies have been received or the services rendered; said certification being based on signed delivery slips or other reasonable procedures.

DEPT. HEAD DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:
CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

Department Head

Deputy Treasurer

City Clerk/Business Admin.



CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530
Phone: (609)397-0110
Fax: (609)397-2203

SHIP TO

POLICE DEPARTMENT
CITY OF LAMBERTVILLE
349 NORTH MAIN STREET
LAMBERTVILLE, NJ 08530

VENDOR

Vendor #: Holicong010

HOLICONG LOCKSMITHS
& CENTRAL SECURITY, INC
PO BOX 126
HOLICONG, PA 18928-0126

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 23-00081-01

ORDER DATE: 01/10/23
DELIVERY DATE: 01/10/23
STATE CONTRACT:
VENDOR ACCT NUM:
VENDOR PHONE #: (215)794-7542
VENDOR FAX #: (215)794-0837
VENDOR EMAIL: acctreceivable@holicongsecurity.com
REQUISITION #:

PAYMENT RECORD

CHECK NO.

DATE PAID **PAID** 102674 JAN 19 2023

NOTICE: TAX EXEMPT - TAX ID: 22-6002021

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	349 N MAIN; INV R178521 PERIOD FEB 1, 2023 - APR 30, 2023	3-01-25-240-229 POLICE Other Contractual Items	96.7700	96.77
			TOTAL	96.77

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under penalties; of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any; person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

VENDOR SIGN HERE

OFFICIAL POSITION

DATE

TAX ID NO. OR SOCIAL SECURITY NO.

OFFICER'S CERTIFICATION

I, having knowledge of the facts, certify that the materials and supplies have been received or the services rendered; said certification being based on signed delivery slips or other reasonable procedures.

DEPT. HEAD

DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:
CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

Department Head

Deputy Treasurer

City Clerk/Business Admin.

Holicong Security

P.O. Box 126
Holicong, PA 18928
215-794-7542

INVOICE

Date 1/06/23
Please Remit Payment By: 1/26/23

Tear Off This Top Stub And Return With Payment

Page 1

City Of Lambertville
18 York Street
Lambertville, NJ 08530

Lambertville Police Department
349 N Main Street
Lambertville, NJ 08530

Account No	Invoice No	P.O Number	Sales Person	Please Pay This Amount
LAM08	R 178521			96.77

Description	Tax	Amount
Commercial Entrance/Exit Monitoring For Period FEB 1, 2023 To APR 30, 2023		89.85
24 Hour Automatic Test Timer		
800 Service		18.00
15% Special Discount for Police Departments		6.00
		-17.08

Payment due by February 10th
We Accept Visa/MC, Discover & American Express
Holicong Security

Total Charges	96.77
Sales Tax	0.00
Total Due	96.77



CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530
Phone: (609)397-0110
Fax: (609)397-2203

SHIP TO

POLICE DEPARTMENT
CITY OF LAMBERTVILLE
349 NORTH MAIN STREET
LAMBERTVILLE, NJ 08530

VENDOR

Vendor #: HOLIC010

HOLICONG LOCKSMITHS
& CENTRAL SECURITY, INC
PO BOX 126
HOLICONG, PA 18928-0126

Purchase Order

THIS NUMBER MUST APPEAR ON ALL INVOICES,
PACKING LISTS, CORRESPONDENCE, ETC.

NO. 23-00081-01

ORDER DATE: 01/10/23
DELIVERY DATE: 01/10/23
STATE CONTRACT:
VENDOR ACCT NUM:
VENDOR PHONE #: (215)794-7542
VENDOR FAX #: (215)794-0837
VENDOR EMAIL: acctsreceivable@holicongsecurity.com
REQUISITION #:

PAYMENT RECORD

CHECK NO.

DATE PAID

NOTICE: TAX EXEMPT - TAX ID: 22-6002021

QUANTITY	DESCRIPTION	ACCOUNT NO	UNIT PRICE	TOTAL
1.00	349 N MAIN; INV R178521 PERIOD FEB 1, 2023 - APR 30, 2023	3-01-25-240-229 POLICE Other Contractual Items	96.7700	96.77
			TOTAL	=====
				96.77

CLAIMANT'S CERTIFICATION & DECLARATION

I do solemnly declare and certify under penalties; of the law that the within bill is correct in all its particulars; that the articles have been furnished or services rendered as stated therein; that no bonus has been given or received by any; person or persons within the knowledge of this claimant in connection with the above claim; that the amount therein stated is justly due and owing; and that the amount charged is a reasonable one.

Rosemary McAnany
VENDOR SIGN HERE

Accts Receivable 1/11/23
OFFICIAL POSITION DATE

23 204 3474

TAX ID NO. OR SOCIAL SECURITY NO.

OFFICER'S CERTIFICATION

I, having knowledge of the facts, certify that the materials and supplies have been received or the services rendered; said certification being based on signed delivery slips or other reasonable procedures.

DEPT. HEAD DATE

VENDOR MUST SIGN CERTIFICATION STATEMENT ON THIS VOUCHER. MAIL VOUCHER & ITEMIZED BILLS TO:
CITY OF LAMBERTVILLE
18 YORK ST
LAMBERTVILLE, NJ 08530

APPROVAL TO PURCHASE

DO NOT ACCEPT THIS ORDER UNLESS IT IS SIGNED BELOW

Department Head

Deputy Treasurer

City Clerk/Business Admin.