

XFINITY HOME



Comcast
3077 Comcast Place
Livermore, CA 94551

We would like to welcome you as a new customer of XFINITY Home!

Certain municipalities in California require home security system users to obtain an alarm registration/user permit. It is your responsibility to comply with these requirements. **If you fail to do so, the municipality could delay or refuse to dispatch emergency personnel and/or assess you fines.**

As a courtesy, we have compiled the requirements for some areas that require an alarm registration/user permit on the reverse side of this letter. This list is not exhaustive and you should confirm registration requirements with your municipality.

Once you receive your permit (where required), please login to the subscriber portal at www.xfinity.com/xhportal; go to the **Security** menu, select "**Emergency Dispatch Setup**" and enter your permit number along with the expiration date at the bottom of the page.

Please contact your local municipality with any questions regarding alarm registration and user permits.

Thank you,

XFINITY Home Team
1-800-XFINITY

County	City	Details
Alameda	Dublin	<p>All alarm systems users are required to fill out an emergency response card in person at the Dublin Police Department.</p> <p>Cost: No Fee</p> <p>Application: See Attached</p>
	Hayward	<p>Hayward Police Department requires alarm users to register their alarm with the police department.</p> <p>Cost: \$32.00</p> <p>Application: See Attached</p>
	Newark	<p>Newark Alarm Permit Center outsources its alarm registration to a third party company called PMAM, Corp.</p> <p>The Authority requires alarm users to register their alarm with the city Alarm Program</p> <p>Cost: \$50.00</p> <p>Application: https://www.cityalarmpermit.com/fams/citizen/city/newark/ATB_Login.aspx# </p>
	Oakland	<p>The Oakland Police Department outsources its alarm user registration to a third party company named ATB Services.</p> <p>The Oakland Police Department requires alarm users to register their alarm with the police department.</p> <p>Cost: \$25.00 (\$15.00 - Seniors)</p> <p>Application:http://www.atbservicesonline.com/Oakland/Assets/User%20Reg%20Form-Ver%201%20Rev%201_Monitored%20Alarms%20Only.pdf</p>
	San Leandro	<p>San Leandro Police Department - Alarm Program requires alarm users to register their alarm with the Police Department.</p> <p>Cost: No Fee</p> <p>Application:http://www.sanleandro.org/civica/filebank/blobdload.asp?BlobID=6828</p>

County	City	Details
Alameda	Unincorporated County Area	Alameda County Sheriff's Department requires alarm users to register their alarm system with the Sheriff's department. Cost: \$35.00 Application: http://alamedacountysheriff.org/LES/alarm/AlarmPermitApplication-fill.pdf
	Union City	Union City Police Department requires alarm users to register their alarm with the police department. Cost: \$39.00 Application: http://www.union-city.ca.us/police/pd_pdfs/AlarmPermit.pdf
Amador	Jackson	Security alarm users are required to obtain a permit from the Jackson Police Department. Cost: \$25.00 Application: http://www.ci.jackson.ca.us/PDF/police/Business_Alarm_Permit_Application_prot.pdf
Butte	Chico	Alarm system users (smoke and security) must obtain a permit. The Chico Finance Department handles alarm permits for the City of Chico. Cost: \$29.50 Application: http://www.chico.ca.us/finance/documents/AlarmPermitApp7-13-10.pdf
	Oroville	The Oroville Police Department requires alarm users to register their alarm with the police department. Cost: \$28.00 Application: See Attached

County	City	Details
Butte	Paradise	Paradise Police Department outsources its alarm user registration to ATB Services. The Paradise Police Department requires alarm users to register their alarm with the police department. Cost: \$16.00 Application: See Attached
	Unincorporated County Area	Security alarm users are required to register their alarm with the Sheriff's Office. Cost: \$66.00 Application: See Attached
Contra Costa	Antioch	Alarm users are required to register their alarm with the Antioch Police Department. Cost: \$33.00 Application: http://www.ci.antioch.ca.us/CityGov/Police/AlarmPermitApp.pdf
	Concord	Security alarm systems must be registered. As per the authority, homeowners must apply in person at the Concord Police Department. Cost: \$40.00 Application: Homeowners must apply in person at the Concord Police Department
	Danville	Security alarm users are required to obtain a permit from the Danville Police Department. Cost: No Fee Online Application: http://www.ci.danville.ca.us/Permits/Alarm/Alarm_Permit_Form/ Mail Application: http://www.ci.danville.ca.us/WorkArea/linkit.aspx?LinkIdentifier=id&ItemID=6237&libID=6211

County	City	Details
Contra Costa	El Cerrito	Security alarm users are required to obtain a permit from the El Cerrito Police Department. Cost: \$27.00 Application: http://ca-elcerrito.civicplus.com/DocumentView.aspx?DID=365
	Martinez	Either the homeowner or the alarm installation company must register a monitored security alarm system with the Martinez Police Department. This must be done 24 hours before the system is activated. Cost: \$30.00 Application: Only available in person at the Martinez Police Department.
	Pleasant Hill	Security alarm users are required to obtain a permit from the Pleasant Hill Police Department. Cost: \$57.00 (pro-rated) Application: http://www.ci.pleasant-hill.ca.us/DocumentView.aspx?DID=4545
	Walnut Creek	Security alarm users are required to obtain a permit from the Walnut Creek Police Department. Cost: No Fee Application: http://www.walnut-creek.org/civica/filebank/blobload.asp?BlobID=4051
El Dorado	Placerville	The Placerville Police Department requires alarm users to register their alarms. Cost: \$35.00 Application: See Attached

County	City	Details
El Dorado	Unincorporated County Area	<p>The El Dorado County Sheriff's office requires alarm users to register their alarms.</p> <p>Cost: \$30.00</p> <p>Application: See Attached</p>
Fresno	Fresno	<p>Alarm systems users are not required to register until after there has been a false alarm.</p> <p>Contact the Fresno Police Department for more information.</p>
	Reedley	<p>Alarm users are required to register their alarm systems with the Reedley Police Department.</p> <p>Cost: No Fee</p> <p>Application: See Attached</p>
Glenn	Orland	<p>Alarm users are required to register their alarm systems with the Orland Police Department.</p> <p>Cost: No Fee</p> <p>Application: http://cityoforland.com/_documents/AlarmPermitApplication_001.pdf </p>
Kings	Hanford	<p>Alarm users are required to register their alarm systems with the Hanford Police Department.</p> <p>Cost: \$20.00</p> <p>Application: http://www.ci.hanford.ca.us/civica/filebank/blobdload.asp?BlobID=2363 </p>

County	City	Details
Madera	Madera	<p>The alarm system user must obtain a permit. The Alarm Company must ensure the homeowner has obtained a user permit prior to installation</p> <p>Cost: \$50.00</p> <p>Application: http://www.cityofmadera.org/c/document_library/get_file?uuid=ed7ff04c-34c5-4e56-869f-36d4b914b2a9&groupId=10128</p>
Marin	Corte Madera	<p>Alarm system users must obtain a permit from the Twin Cities Police Department.</p> <p>Cost: \$30.00</p> <p>Application: http://www.ci.larkspur.ca.us/forms.aspx?FID=79</p>
	Larkspur	<p>Alarm system users must obtain a permit from the Twin Cities Police Department.</p> <p>Cost: \$30.00</p> <p>Application: http://www.ci.larkspur.ca.us/forms.aspx?FID=79</p>
	Novato	<p>Alarm system users must obtain a permit.</p> <p>The Alarm Company must obtain a copy of the permit and it shall be served or given to the city within three business days of installing</p> <p>Cost: \$28.00</p> <p>Application: See Attached</p>
	Ross	<p>Alarm system users must obtain a permit.</p> <p>Cost: \$50.00</p> <p>Application: http://www.townofross.org/pdf/public-safety-reports/alarm-permit-application.pdf</p>

County	City	Details
Marin	San Anselmo	<p>Security alarm system users must register their alarm system with the Police Department.</p> <p>Cost: No Fee</p> <p>Application: http://www.townofsananselmo.org/documents/Police/Business%20Emergency%20_%20Alarm_rev%201007.PDF</p>
	San Rafael	<p>Alarm system users must obtain a permit from the San Rafael Police Department.</p> <p>Cost: \$74.00</p> <p>Application: http://www.srpd.org/downloads/permits/alarm_permit_application_form.pdf</p>
	Sausalito	<p>Alarm users are required to register their alarm systems with the Sausalito Police Department.</p> <p>Cost: \$25.00</p> <p>Application: http://ci.sausalito.ca.us/Index.aspx?page=173</p>
Mendocino	Fort Bragg	<p>Alarm users are required to register their alarm systems with the Fort Bragg Police Department.</p> <p>Cost: No Fee</p> <p>Application: See Attached</p>
	Unincorporated County Area	<p>Alarm users are required to register their alarm systems with the Mendocino County Sheriff's Office.</p> <p>Cost: No Fee</p> <p>Application: See Attached</p>

County	City	Details
Merced	Unincorporated County Area	<p>Merced County Sheriff's Office requires alarm users to register their alarm system.</p> <p>Cost: \$20.00</p> <p>Application: http://www.co.merced.ca.us/documents/Sheriff's%20Department/Alarm%20Permit%20Application.PDF</p>
Monterey	Carmel	<p>Alarm users are required to register their alarm systems with the Carmel Police Department.</p> <p>Cost: \$20.00</p> <p>Application: See Attached</p>
	Marina	<p>Alarm users are required to register their alarm systems with the Marina Police Department.</p> <p>Cost: \$20.00</p> <p>Application: See Attached</p>
	Monterey	<p>Alarm users are required to register their alarm systems with the Monterey Police Department.</p> <p>Cost: \$25.00</p> <p>Application: See Attached</p>
	Pacific Grove	<p>Alarm users are required to register their alarm systems with the Pacific Grove Police Department.</p> <p>Cost: \$50.00</p> <p>Application: See Attached</p>

County	City	Details
Monterey	Salinas	Security alarm users are required to register their alarm systems with the Salinas Police Department. Cost: \$36.00 Application: http://www.salinaspd.com/online_services/pdf/Burglar_Alarm_Application.pdf
	Unincorporated County Area	Security alarm users are required to register their alarm systems with the Monterey County Sheriff Police Department. Cost: \$50.00 Application: http://www.co.monterey.ca.us/sheriff/pdfs/newalarmpermit_app.pdf
Napa	Napa	Alarm users are required to register their alarm systems with the Napa Police Department. Cost: \$34.50 Application: http://cityofnapa.org/images/police/new%20alarm%20perm.pdf
	Saint Helena	Security alarm users are required to obtain an alarm permit with the St. Helena Police Department. Cost: \$36.00 Application: See Attached
Placer	Roseville	The City of Roseville outsources their alarm user registrations to a third party named Crywolf, Inc. Security alarm system users must obtain a permit, the permit may only be applied for online. Cost: \$35.00 Application: https://www.crywolf.us/rosevilleca/RegForm/NewRegFormLong.aspx
Sacramento	Citrus Heights	Security alarm system users must obtain a permit with the Citrus Heights Police Department. Cost: \$50.00 http://www.citrusheights.net/docs/alarm_application_-_08.05.09.pdf

County	City	Details
Sacramento	Elk Grove	<p>Security alarm users must obtain an alarm permit from the Elk Grove Police Department - Alarm Bureau.</p> <p>Cost: \$50.00</p> <p>Application: http://www.elkgrovepd.org/documents/egpd-alarm-permit-application.pdf#search='alarm'</p>
	Folsom	<p>Security alarm system user must obtain a permit from the Folsom Police Department.</p> <p>Cost: \$26.00</p> <p>http://www.folsom.ca.us/civica/filebank/blobdload.asp?BlobID=9810#page=</p>
	Galt	<p>It is suggested that security users register the system with the Galt Police Department. This is not a requirement, merely a suggestion. Applicants can call the police department and have the form mailed to them or apply in person.</p> <p>Cost: No Fee</p> <p>Application: In person only</p>
	Isleton	<p>Alarm users are required to register their alarm systems with the Isleton Police Department.</p> <p>Cost: No Fee</p> <p>Application: There are no forms and registration can only be done in person.</p>
	Rancho Cordova	<p>Security alarm system users must obtain a permit from the Sacramento County Sheriff's Office- Alarm Ordinance Bureau.</p> <p>Cost: \$50.00</p> <p>Application: http://www.sacsheriff.com/forms/documents/RC_APPLICATION1.pdf</p>

County	City	Details
Sacramento	Sacramento	<p>Alarm users are required to register their alarm systems with the Sacramento Police Department. It is required that the alarm company obtain a copy of the permit from the homeowner as proof of registration</p> <p>Cost: \$40.00</p> <p>Application: http://www.sacpd.org/pdf/SacAlarmPermitApp.pdf</p>
	Unincorporated County Area	<p>Security alarm users are required to obtain an alarm permit with the Sacramento County Sheriff's Department - Alarm Bureau</p> <p>Cost: \$50.00</p> <p>Application: http://www.sacsheriff.com/forms/documents/SSD_APPLICATION.pdf</p>
San Francisco	San Francisco	<p>Every emergency alarm system must be licensed with the Office of the Treasurer & Tax Collector before the system is placed into service. It is the alarm installation or monitoring company's responsibility to collect the alarm license application and fee.</p> <p>Cost: \$45.00</p> <p>Application: http://www.sfdem.org/Modules/ShowDocument.aspx?documentid=816</p>
	Unincorporated County Area	<p>Every emergency alarm system must be licensed with the Office of the Treasurer & Tax Collector before the system is placed into service. It is the alarm installation or monitoring company's responsibility to collect the alarm license application and fee.</p> <p>Cost: \$45.00</p> <p>Application: http://www.sfdem.org/Modules/ShowDocument.aspx?documentid=816</p>
San Joaquin	Lodi	<p>Lodi Police Department requires alarm users to register their alarm with the police department.</p> <p>Cost: \$25.00</p> <p>Application: See Attached</p>

County	City	Details
San Joaquin	Manteca	<p>Manteca Police Department requires alarm users to register their alarm with the police department.</p> <p>Cost: No Fee</p> <p>Application: http://www.ci.manteca.ca.us/forms/Police/alarm_permit.pdf </p>
	Stockton	<p>Security alarm system user must obtain a permit from the Stockton Police Department.</p> <p>Cost: \$55.00</p> <p>Application: http://www.stocktongov.com/files/Alarm%20Permit%20Application.pdf </p>
	Tracy	<p>Alarm system users must obtain a permit from the Tracy Police Department.</p> <p>Cost: \$20.00</p> <p>Application: http://www.ci.tracy.ca.us/documents/Residential_Alarm_Permit_Application.pdf </p>
	Unincorporated County Area	<p>Alarm users are required to register their alarm systems with the San Joaquin County Sheriff's Department.</p> <p>Cost: No Fee</p> <p>Application: http://www.sjgov.org/sheriff/AlarmApp.pdf</p>
San Mateo	Belmont	<p>Security alarm system user must obtain a permit from the Belmont Police Department.</p> <p>Cost: \$50.00</p> <p>Application: Forms must be obtained in person or through the mail upon request</p>

County	City	Details
San Mateo	Burlingame	<p>Burlingame Police Department requires alarm users to register their alarm with the police department.</p> <p>Cost: \$49.50</p> <p>Application: http://www.burlingame.org/Modules/ShowDocument.aspx?documentid=5792</p>
	Daly City	<p>Alarm system users must obtain a permit from the Daly City Finance Department. The permit application will then be forwarded to the Police Department.</p> <p>Cost: \$25.00</p> <p>Application: http://www.dalycity.org/Assets/Departments/Police/pdf/Alarm+Application.pdf</p>
	Foster City	<p>Security alarm system users must register their alarms with the Foster City Police Department.</p> <p>Cost: No Fee</p> <p>Application: There is no formal application but the alarm system user is required to call the police department to inform them of the alarm installation.</p>
	Half Moon Bay	<p>Security alarm system user must obtain a permit from the Half Moon Bay Finance Department. The Alarm Ordinance makes it unlawful to install or service an alarm system that does not have a valid alarm system permit.</p> <p>Cost: \$50.00</p> <p>Application: See Attached</p>
	Hillsborough	<p>Alarm system users must obtain a permit from the Hillsborough Police Department</p> <p>Cost: \$60.00</p> <p>Application: See Attached</p>

County	City	Details
San Mateo	Menlo Park	<p>Security alarm system users must obtain a permit from the Menlo Park Police Department.</p> <p>Cost: \$25.00</p> <p>Application: http://www.menloparkpolice.org/communications/pdf/alar_m_app.pdf</p>
	Millbrae	<p>Security alarm system users must obtain a permit from the Millbrae Police Department.</p> <p>Cost: \$71.00</p> <p>Application: http://www.ci.millbrae.ca.us/Modules/ShowDocument.aspx?documentid=2972</p>
	Pacifica	<p>Security alarm system users must obtain a permit from the Pacifica Police Department.</p> <p>Cost: \$75.00</p> <p>Application: http://www.cityofpacifica.org/civica/filebank/blobdload.asp?BlobID=2984</p>
	San Carlos	<p>Alarm system users must obtain a permit from the San Carlos Police Department.</p> <p>Cost: \$51.00</p> <p>Application: http://www.cityofsancarlos.org/civica/filebank/blobdload.asp?BlobID=3254</p>
	Woodside	<p>Security alarm system users must obtain a permit from the Woodside Town Hall.</p> <p>Cost: \$30.00</p> <p>Application: http://www.woodsidetown.org/sites/default/files/fileattachments/alarm_permit_application_2011.pdf</p>

County	City	Details
Santa Barbara	Santa Maria	<p>Security alarm system users must obtain a permit from the Santa Maria Police Department - Alarm Permitting Program.</p> <p>Cost: \$13.40</p> <p>Application: https://www.cityalarmpermit.com/fams/citizen/city/SantaMaria/PermitApp.pdf</p>
Santa Clara	Campbell	<p>There are no formal alarm system user registration/permit requirements. However, they request that the alarm user provide their contact and alarm information.</p> <p>Cost: No Fee</p> <p>Application: The alarm user can obtain the registration form from the police department</p>
	Los Altos	<p>Security alarm system users must obtain a permit from the Los Altos Police Department.</p> <p>Cost: \$37.00</p> <p>Application: http://www.ci.los-altos.ca.us/police/documents/Resident%20Permit%20Application.pdf</p>
	Mountain View	<p>Security alarm system users must obtain a permit from the Mountain View Police Department.</p> <p>Cost: \$20.00</p> <p>Application: http://www.mountainview.gov/civica/filebank/blobdload.asp?BlobID=3686</p>
	Palo Alto	<p>Security alarm system users must obtain a permit from the Palo Alto Police Department.</p> <p>Cost: \$35.00</p> <p>Application: http://www.cityofpaloalto.org/civica/filebank/blobdload.asp?BlobID=3933</p>

County	City	Details
Santa Clara	Santa Clara	Security alarm system users must obtain a permit from the Santa Clara Police Department. Cost: \$23.50 Application: http://scpd.org/Modules/ShowDocument.aspx?documentid=135
	Saratoga	Alarm users are required to register their alarm system with the Saratoga Town Hall. Cost: No Fee Application: http://www.saratoga.ca.us/civica/filebank/blobdload.asp?BlobID=3588
	Sunnyvale	Security alarm system users must obtain a permit from the Sunnyvale Police Department Cost: \$35.00 Application: http://sunnyvale.ca.gov/Portals/0/Sunnyvale/DPS/CrimePrevention/AlarmPermit_nonForm.pdf
Santa Cruz	Santa Cruz	Alarm users are required to register their alarm systems with the Police Department. Cost: \$25.00 Application: http://www.cityofsantacruz.com/Modules/ShowDocument.aspx?documentid=1980
	Scotts Valley	Alarm users are required to register their alarm systems with the Police Department. Cost: \$26.00 Application: http://www.scottsvalleypd.com/Downloads/2012AlarmRegistrationForm.pdf

County	City	Details
<p>Santa Cruz</p>	<p>Unincorporated County Area</p>	<p>Alarm users are required to register their alarm systems with the Police Department.</p> <p>Cost: \$40.00 (Initial), \$25.00 (Renewal)</p> <p>Application: http://www.scsheriff.com/LinkClick.aspx?fileticket=D9hF5hH2Dqk%3d&tabid=929</p>
<p>Solano</p>	<p>Fairfield</p>	<p>Alarm users are required to register their alarm systems with the Police Department.</p> <p>Cost: \$38.00</p> <p>Application: http://www.fairfield.ca.gov/civica/filebank/blobdload.asp?BlobID=5223</p>
	<p>Suisun City</p>	<p>Alarm system users must obtain a permit from the Police Department.</p> <p>Cost: \$30.00</p> <p>Application: http://www.suisun.com/FormsApplications/pdf%20forms/App_AlarmPermit.pdf</p>
	<p>Vacaville</p>	<p>Alarm system users must obtain a permit from the Police Department. The alarm company is required to ensure that the alarm user obtains the necessary alarm permit.</p> <p>Cost: \$25.00</p> <p>Application: http://www.cityofvacaville.com/departments/police/_documents/Alarm%20Registration%20Form%202-1-11.pdf</p>
<p>Sonoma</p>	<p>Cotati</p>	<p>Alarm users are required to register their security alarm systems with the Police Department.</p> <p>Cost: \$10.00</p> <p>Application: Only available in person at the Cotati Police Department.</p>

County	City	Details
Sonoma	Santa Rosa	<p>Alarm users are required to register their alarm systems with the Police Department.</p> <p>Cost: \$10.00</p> <p>Application: See Attached</p>
Stanislaus	Modesto	<p>Alarm users are required to register their alarm systems with the Modesto City Police Department.</p> <p>Cost: No Fee</p> <p>Application: http://www.modestogov.com/mpd/docs/permits/alarm_permit.pdf </p>
	Unincorporated County Area	<p>Alarm users are required to register their alarm systems with the Sheriff's Department.</p> <p>Cost: \$20.00</p> <p>Application: See Attached</p>
Sutter	Yuba City	<p>Security system alarm users are required to obtain a permit for their alarm systems from the Police Department.</p> <p>Cost: \$43.50</p> <p>Application: http://www.ycpd.org/documents/alarmpapp.pdf </p>
Tulare	Visalia	<p>Alarm users are required to obtain a permit for their alarm systems with the Police Department.</p> <p>Cost: \$15.00</p> <p>Application: http://www.ci.visalia.ca.us/civica/filebank/blobdload.asp?BlobID=11102 </p>

County	City	Details
Tuolumne	Unincorporated County Area	Alarm users are required to register their alarm systems with the Police Department. Cost: \$35.00 Application: http://portal.co.tuolumne.ca.us/ps/psft/V-2079456021/RegistrationForm.pdf
Yolo	Davis	Alarm users are required to register their alarm systems with the Police Department. Cost: \$25.00 Application: http://cityofdavis.org/police/pdfs/forms/Alarm_Permit_Residential_Application.pdf
Yuba	Marysville	The Authority confirmed that alarm users are required to obtain a permit for their alarm systems from the Police Department. Cost: \$40.00 Application: See Attached

Alarm Company Information

Comcast Broadband Security, LLC d/b/a Xfinity Home
3077 Comcast Place
Livermore, CA 94551
1-800-934-6489

Monitoring Company Information

C.O.P.S. Monitoring
1041 Glassboro Road, Building F
Williamstown, NJ 08094
856-629-1111



Date: _____

**Business Site
Emergency Response Card
for use by Police and Fire**

Dublin Police Services
100 Civic Plaza
Dublin, CA 94568
(925)833-6670

Business Name: _____ Phone: _____

Business Address: _____ Business Hours: _____

Property Owner: _____ Phone: _____

Alarm Type: burglary fire audible silent

Alarm Co Name/phone #: _____

Safe on Premises: yes no Location: _____

Night lighting: yes no Location: _____

Number of exits: _____ Location: _____

Windows: yes no Location: _____ Skylights: yes no Location: _____

Knox Box: yes no Location: _____

Haz. Materials: yes no Location: _____

Location of electric panel: _____ Location of gas main: _____

After hours emergency call out list: NAME: PHONE #.

1 _____

2 _____

3 _____



ALARM USER PERMIT RENEWAL FORM

This form is for a Commercial or Business System Residential System

Type of alarm system (check all applicable) Burglary Hold-up/Robbery Panic/Duress

Alarm user/applicant is the Owner of the premises Tenant renting the premises

Business Name _____

Residence Last Name _____ First Name _____

Address of alarmed location _____ Unit, Space, or Suite No. _____

Phone number at alarmed location _____ Alternate phone at alarmed location _____

Mailing address (if different) _____ City _____ State _____ Zip Code _____

Alarm Company that installed or repairs your system Name _____ Phone Number _____
 Address _____

Alarm Company that monitors your alarm system Name _____ Phone Number _____
 Address _____

Please provide the names and contact information for three people who can respond in the event of an alarm. These people should be able to reset the alarm and secure the premises.

Name _____

Address _____ City _____ Zip Code _____

Phone Number _____ Phone Number _____

Name _____

Address _____ City _____ Zip Code _____

Phone Number _____ Phone Number _____

Name _____

Address _____ City _____ Zip Code _____

Phone Number _____ Phone Number _____

Mail the completed renewal form and your payment, payable to CITY OF HAYWARD to:

**Hayward Police Department
 ATTN: ALARM DESK
 300 W Winton Ave
 Hayward CA 94544-1137**

\$ 32⁰⁰
(510) 293-7158

OFFICE USE ONLY	
Permit No. _____	Issued _____
Check No. _____	Date Paid _____



ALARM USER PERMIT APPLICATION

OROVILLE POLICE DEPARTMENT

2055 Lincoln Street
Oroville, CA 95966
530-538-2448

OROVILLE MUNICIPAL CODE § 3A

Instructions: Complete the application form below and submit along with payment to the Oroville Police Department at address noted above.				
GOVERNMENT ENTITIES AND RESIDENTIAL ALARM USERS OVER THE AGE OF SIXTY-FIVE (65) WHO ARE THE PRIMARY RESIDENT OF THE RESIDENCE (AS LONG AS NO BUSINESS IS CONDUCTED AT THE RESIDENCE) ARE EXEMPT FROM PERMIT AND APPLICATION FEES.				
ALARM USER'S NAME		NAME OF BUSINESS (if applicable)		
RESIDENCE ADDRESS	STREET	SUITE/AP	CITY	STATE ZIP CODE
MAILING ADDRESS (if different)				
DAYTIME # ()		EVENING # ()		
CHECK MARK AN "X" IN APPROPRIATE BOX		RESIDENTIAL ALARM ()	COMMERCIAL ALARM ()	
TYPE OF ALARM		BURGLARY ()	ROBBERY ()	PANIC ()
EMERGENCY CONTACT (Person authorized to respond to alarms and to open premises other than alarm user or agent)				
Contact # 1 Name	Last name	First Name	(MI)	
Residence Address				
DAYTIME PHONE #		EVENING PHONE #		
ALARM AGENT / ALARM COMPANY / MONITORING ALARM COMPANY				
ALARM AGENT	Last name	First Name	(MI)	
ALARM COMPANY ADDRESS				
DAYTIME PHONE #		EVENING PHONE #		
SYSTEM DESCRIPTION OF THE AUTOMATIC SHUTOFF OR RESET FEATURE				
SYSTEM DESCRIPTION OF AUXILIARY POWER SUPPLYING THE EVENT OF POWER DISRUPTION				

I UNDERSTAND THAT A PERMIT IS VALID ONLY FOR THE ABOVE ADDRESS LOCATION AND MAY NOT BE TRANSFERRED TO ANY NEW LOCATION OR ALARM USER. I HAVE RECEIVED AND READ A COPY OF THE OROVILLE MUNICIPAL CODE REGULATING ALARM SYSTEMS WITHIN THE INCORPORATED AREA AND WILL NOTIFY THE OROVILLE POLICE, IN WRITING, WITHIN TEN (10) DAYS OF ANY CHANGE IN ANY INFORMATION CONTAINED HEREIN OR OF ANY CHANGE OF OWNERSHIP OF THE PERMITTED PREMISES.

APPLICANT SIGNATURE _____

DATE _____

ANNUAL FEE: \$28
(fee is non-transferable and must be submitted with this application)
Make checks payable to : CITY OF OROVILLE

OROVILLE POLICE DEPARTMENT ONLY

[] PERMIT ISSUED
[] OTHER _____
BY: _____

TOWN OF PARADISE
FALSE ALARM REDUCTION PROGRAM
 C/O ATB SERVICES, LLC.
 P.O. BOX 26364
 COLORADO SPRINGS, CO 80936
 1-800-861-5944



ALARM REGISTRATION FORM

RESIDENTIAL

BUSINESS

Name of responsible party(Please print)

Name of responsible party(Please print)

Alarm Location Address

Alarm Location Address

City, State and Zip Code

City, State and Zip Code

Billing Address (if different)

Billing Address (if different)

Home Phone: _____

Type of business conducted: _____

Cell Phone: _____

Office Phone: _____

Alternate Contact Name: _____

Alternate Contact Name: _____

Alternate Contact Phone: _____

Alternate Contact Phone: _____

SPECIAL CONDITIONS

In order to ensure the safety of our police officers and the public and to enable the police department to better protect your property Please provide information regarding potentially hazardous circumstances (i.e. guard animals, weapons, hazardous substances, etc.)

Comment: _____

ALARM INSTALLATION DETAILS

Alarm Installation Company: _____

Monitoring Company:(if different) _____

It is the alarm owner's responsibility to prevent false alarms and to ensure that all users of the system are trained in the use of the system. Additionally, it is the alarm owner's responsibility to notify the alarm company of any changes to this information.

Signature: (Owner) _____

Date: _____

In accordance with Town Council Ordinance Number 410, if you have an alarm system in the Town of Paradise, it must be registered with the Town. Registration is \$16.00. Fees for excessive false alarms during each registration period are as follows: The first 2 false alarms are free. False alarm number 3 is \$84.00. False alarm number 4 is \$100.80. False alarm number 5 and over is \$114.24 each. A permit may be revoked if registration and/or false alarm fees are not paid in a timely manner.

Make Checks Payable To: Town Of Paradise
 One Time Registration Fee: \$16.00

Return this form and registration fee to:

Town of Paradise
 C/O ATB Services, LLC.
 P.O. Box 26364
 Colorado Springs, CO 80936

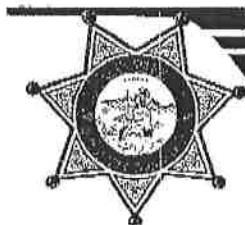
For Customer Service Call: 1-800-861-5944

For Office Use Only

Registration Number _____

Date Received _____

Expiration Date _____



BUTTE COUNTY OFFICE OF THE
SHERIFF

JERRY W. SMITH
SHERIFF-CORONER

BURGLARY AND ROBBERY ALARM ORDINANCE SUMMARY

- Residential and commercial users of alarm systems are required to have an alarm Permit. The permit cost is \$66.00 and is valid for a 3 year period unless revoked for cause.
- There is no fee for residential alarm users age 65 or over.
- The purposes of the ordinance include:
 - Reduce false alarms.
 - Speed up dispatching time.
 - Provide a data base for effective police response.
- Alarm users are allowed twelve (12) false alarms in a twelve (12) month time frame, (January-December), before permit revocation proceedings begin. Additional fees are imposed after three (3) false alarms in the twelve month time frame. The current rate is \$78 each for #4 – 6 false alarms and \$312 each for #7 - 12 during the calendar year.
- Please fill out the permit application completely and accurately. The information you provide will facilitate a faster police response and will also provide the officer with the information necessary to complete the call as quickly and safely as possible.
- This effort by citizens and government should reduce the incidents of false alarms by 50%.
- All permit files are kept under tight security.

If you have additional questions regarding this Ordinance or the attached application, please contact the Alarm Ordinance Office at 538-7494, Monday through Friday, 8AM to 5PM or write to: Butte County Sheriff's Office, 33 County Center Drive, Oroville, CA 95965.

BUTTE COUNTY SHERIFF'S OFFICE
33 COUNTY CENTER DRIVE
OROVILLE, CA. 95965 (530) 538-7321

ALARM USER
PERMIT APPLICATION
Please typewrite or print clearly

ALARM USER'S NAME

1. **OR**
NAME OF BUSINESS: _____

2. **ADDRESS OF ALARMED PREMISE:** _____
Number Street City Zip

MAILING ADDRESS IF DIFFERENT: _____

3. **PHONE # OF ALARMED PREMISE:** () _____

4. **TYPE OF ALARM:** **AUDIBLE** **SILENT** **BOTH**

5. **INDIVIDUAL TO CONTACT IN EVENT OF AN ALARM - (Name and telephone number)**

A. _____

B. _____

C. _____

6. **ALARM CO. NAME:** _____ **24 HR. PHONE # ()** _____

7. **TYPE OF BUILDING:** **SINGLE FAMILY RESIDENCE** **BUSINESS** **APARTMENT**

8. **SPECIAL INSTRUCTIONS TO ASSIST DEPUTIES IN SEARCHING PREMISE:**

NOTE! The permit fee is \$66.00 and is valid for 3 years.

Residential alarm users over the age of 65 years are exempt from the permit fee.

If you qualify for this exemption, check this box:

I certify that the information above is true and correct.

Signature of alarm applicant **Date**

FOR OFFICE USE

DATE CHECK RECEIVED: _____ **AMOUNT:** _____ **PROCESSED BY:** _____

PERMIT NUMBER: _____ **DATE ISSUED:** _____ **DATE EXPIRES:** _____

CITY OF PLACERVILLE ALARM PERMIT

PERMIT NO. _____

LOCATION OF ALARM (Please type or print clearly)

NAME OF BUSINESS: _____

NAME OF RESIDENT: _____

ADDRESS: _____

NUMBER STREET APT/SUITE

CITY STATE ZIP CODE PHONE NUMBER

MAILING ADDRESS: (If different from above)

ADDRESS: _____

NUMBER STREET APT/SUITE

CITY STATE ZIP CODE PHONE NUMBER

EMERGENCY CALL LIST: PLEASE LIST PERSONS TO BE CONTACTED LOCALLY IN CASE OF AN EMERGENCY SOMEONE MUST RESPOND TO YOUR ALARM WITHIN 20 MINUTES AND BRING KEYS TO THE BUILDING.

NAME	DAY PHONE	NIGHT PHONE
_____	_____	_____
_____	_____	_____
_____	_____	_____

ALARM INFORMATION:

TYPE OF ALARM: AUDIBLE _____ SILENT _____

NAME & PHONE NUMBER OF COMPANY THAT INSTALLED YOUR ALARM

NAME _____

PHONE NUMBER _____

NAME & PHONE NUMBER OF COMPANY THAT MONITORS YOUR ALARM

NAME _____

PHONE NUMBER _____

X _____
SIGNATURE DATE

FOR OFFICE USE ONLY

PERMIT

NEW RENEWAL

CHANGE

Paid \$ _____

Receipt # _____

Date _____

Approved: _____

Chief of Police

Date: _____

PLACERVILLE POLICE • 730 Main Street • Placerville, CA 95667 • (530) 642-5210

WHEN VALIDATED WHITE IS PERMIT YELLOW COPY TO FINANCE PINK COPY TO PERMIT APPLICANT

EL DORADO COUNTY ALARM PERMIT APPLICATION

El Dorado County Sheriff's Office
 Central Dispatch
 300 Fair Lane, Placerville, CA 95667
 (530) 621-5499

Alarm Information (complete for all alarms):		
EXACT ADDRESS OF ALARM (complete street address, including suite, building, apartment numbers, etc.):		
Street Address:		
Suite, Bldg, Apt. etc.		
TYPE OF ALARM (check at least one item on each row):		
<input type="checkbox"/> Armed Robbery	<input type="checkbox"/> Burglary	<input type="checkbox"/> Panic
<input type="checkbox"/> Silent	<input type="checkbox"/> Audible	<input type="checkbox"/> Silent/Audible (Combination)
IS ALARM MONITORED? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Name of monitoring company:		
City:		State:
		Phone: ()
LOCATION OF ALARM: <input type="checkbox"/> Residence <input type="checkbox"/> Business (if business, provide the following information)		
Name of Business:		
Days business is normally open:	<input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri <input type="checkbox"/> Sat <input type="checkbox"/> Sun	
Normal business hours:	_____ <input type="checkbox"/> AM <input type="checkbox"/> PM to _____ <input type="checkbox"/> AM <input type="checkbox"/> PM	
Permit Mailing Information		
Last Name:		First Name:
Mailing Address:		
City:		State: CA Zip Code:
Attention:		Phone #: ()
Emergency Call List		
1 st Contact:	Phone Number:	Home:
		Work:
		Cell:
2 nd Contact:	Phone Number	Home:
		Work:
		Cell:
3 rd Contact:	Phone Number	Home:
		Work:
		Cell:
TYPE OF PERMIT: <input type="checkbox"/> New Permit - \$30.00 <input type="checkbox"/> Transfer or Existing Permit - \$10.00		

Signature of Applicant _____

Date _____

EL DORADO COUNTY
ALARM PERMIT APPLICATION

Name: _____

Address: _____

In the space provided below, please give us brief but exact directions to your residence or business where the alarm is located. Also provide a description of the house or business, as these are the directions that will be given to the deputies responding to an alarm. Start from a well-known road or landmark and include any additional information that will assist deputies in locating your home or business. Also note any obstacles the deputy may encounter, such as locked gates, electric fences, backyard pools/spas, animals, reptiles, (dog breeds, etc.)

WRITTEN DIRECTIONS

OBSTACLES

Draw a map following the directions above:



City of Reedley

Police Department
843 "G" Street
Reedley, CA 93654
(559) 637-4250
FAX 638-7218

ALARM SYSTEM

APPLICATION NO. _____

Name of applicant: _____ Today' date: _____

Applicant's address _____

Applicant's phone no.: () _____ Bus. Phone: _____

Applicant's birthdate: _____ Applicant's driver's license #: _____

Social Security No. _____

Location address of alarm: _____

Name of company installing and/or maintaining alarm: _____

Alarm company's address: _____

Alarm company's day phone: () _____ Night phone: () _____

Type of alarm (mark each applicable box:) perimeter only Motion detection
 roof monitor Other: _____
Specify

Please list two other people, other than the applicant, who will be responsible for responding to the scene of an activated alarm. These people must be willing to go to the alarm location at any time of the day or night and take necessary action to silence, reset or correct the alarm problem.

1. _____
(Name) (Address) (City, State) (Zip Code)

Home phone number Business phone number Vehicle make/color/license number/state

2. _____
(Name) (Address) (City, State) (Zip Code)

Home phone number Business phone number Vehicle make/color/license number/state

(Over)

**CITY OF NOVATO
ALARM PERMIT APPLICATION**

SUBSCRIBER INFORMATION	
NAME _____	
ADDRESS _____	SUITE/APT. # _____
CITY/STATE/ZIP _____	PHONE # _____

ALARMED LOCATION INFORMATION	
TYPE: Residence <input type="checkbox"/> Business <input type="checkbox"/> Business Hours <input type="checkbox"/>	
NAME OF BUSINESS _____	
ADDRESS _____	SUITE/APT. # _____
CITY/STATE/ZIP _____	PHONE # _____

ALARM COMPANY INFORMATION	
TYPE ALARM: Burglary <input type="checkbox"/> Panic <input type="checkbox"/> Audible <input type="checkbox"/> Silent <input type="checkbox"/>	
NAME OF BUSINESS _____	
ADDRESS _____	SUITE/APT. # _____
CITY/STATE/ZIP _____	PHONE # _____

EMERGENCY CONTACT INFORMATION		
_____ Name	_____ (Area Code)Day Phone	_____ (Area Code) Night Phone
_____ Name	_____ (Area Code)Day Phone	_____ (Area Code) Night Phone
_____ Name	_____ (Area Code)Day Phone	_____ (Area Code) Night Phone

Signature _____ Date _____

**Please forward \$28 fee, payable to the City of Novato, with this application to:
Novato Police Department - Crime Prevention Bureau
909 Machin Avenue, Novato, CA 94945**

Office Use Only

Permit Number _____ Date Issued _____



FORT BRAGG POLICE DEPARTMENT
Alarm System Registration Form

FBPD Alarm # _____ Name of Business: _____

Address: _____

Phone: () _____ Nature of Business: _____

Type of System: Burglary Robbery Fire/Smoke Panic/Health Other/Specify _____

Alarm is: Audible Silent Audible with Delay – Delay Time: _____

Business Owner/Operator: _____ Phone: () _____

Home Address: _____

Alarm Service Company: _____ Phone: () _____

Address: _____

Persons authorized to respond to an activated alarm:

Name: _____ Phone: () _____

Name: _____ Phone: () _____

Name: _____ Phone: () _____

Name: _____ Phone: () _____

You must report any changes in authorized personnel within 10 days.

- The Fort Bragg Municipal Code requires all new alarms systems be registered with the Fort Bragg Police Department 24 hours prior to activation (5.36.030 Fort Bragg Muni Code).
- An alarm system is defined as (1) any device designed for the detection of an unauthorized entry into any building, place or premises, or for the alerting of others of the existence of any emergency situation, or of the commission of an unlawful act, which when activated emits a sound or transmits a signal or message, and which directly or indirectly initiates or causes a response by the police; or (2) any device designed for the detection of fire or smoke in any building which initiates or causes a response by the fire department (5.36.020 Fort Bragg Muni Code).
- Failure of any alarm user to register any alarm system as set forth in this section shall be grounds for non-response by the police department, fire department or other emergency unit of the city to any signal from that alarm system, until the alarm system is registered...(5.36.030 Fort Bragg Muni Code).
- The maximum allowable number of false alarms reported by any alarm system shall be five (5) per each calendar year. After the second false alarm response, the Chief of Police shall notify the alarm user of the violation and consequences of further false alarms. After a third false alarm, the alarm user shall pay the city a false alarm fee of \$50. After a fourth false alarm, the alarm user shall pay the city a false alarm fee of \$100. After a fifth false alarm, the alarm user shall pay the city a false alarm fee of \$200. The alarm system may also be ordered disconnected (5.36.070 Fort Bragg Muni Code).

MENDOCINO COUNTY SHERIFF'S OFFICE

ALARM SYSTEM REGISTRATION

Name of Alarm Location: _____

Alarm Location Information: _____ Telephone: _____

Address: _____ City: _____

Cross Street: _____

Name of Alarm User: _____

Alarm User Residence Address: _____ Telephone: _____

Alarm User Business Address: _____ Telephone: _____

Alarm Reports to: Sheriff

Answering Service (name): _____

Other: _____

Alarm Reports by: Supervised Line Digital Dialer Audible Other: _____

List all persons authorized to have access to the building AND alarm system.

Name _____ Address _____ Telephone: _____

Name _____ Address _____ Telephone: _____

Name _____ Address _____ Telephone: _____

Name _____ Address _____ Telephone: _____

(you must report any changes in authorized personnel within ten days)

Alarm Co. Name and Address: _____

Alarm User Signature: _____

Registered by: _____ I.D.# _____ Date: _____

Description of Premises or Area Protected: _____

MENDOCINO COUNTY SHERIFF'S OFFICE

ALARM SYSTEM REGISTRATION INFORMATION

- Section 8.60.030 of the Mendocino County Code requires all new alarm systems be registered with the Sheriff at least 24 hours prior to activation. An alarm system is any device designed for the detection of unauthorized entry or the commission of an unlawful act which when activated directly or indirectly initiates or causes a response by the Sheriff. (See below)
- Prompt registration of alarm systems will help the Sheriff provide quick and efficient response to alarm signals. Your assistance in registering alarms is appreciated, and will also help to protect the safety of the public and officers.
- Alarms installed before September 17, 1979, must be registered within ten (10) days of the time that registration is requested by the Sheriff.
- **Instructions for completing the Alarm System Registration form:**
 - ⇒ **Name of alarm location:** Fill in the name of the business or last name of the family if alarm is in a residence. (i.e., Mac's Pizza, or Jones' Residence.)
 - ⇒ **Name of alarm user:** The alarm user is anyone who operates or uses, or causes or allows to be operated or used, any alarm system.
 - ⇒ **Alarm reports to/by:** If you need help with this information, contact your alarm company or the Sheriff's Alarm Coordinator.
 - ⇒ **Description of area protected:** Section 8.60.030 M.C.C. requires you list a description of the premises or areas protected by the alarm system, including the location folders, windows and areas protected by the alarm system within the premises. If a perimeter alarm system protects EVERY door, window and other opening in the exterior of a building, the statement "*perimeter protection*" will suffice. If only a part of an area is protected, that part must be described separately. The same would apply to interior or space protection if the entire premise is protected. If not, list protected areas separately. Use the back of the "Alarm System Registration" form if necessary.

MENDOCINO COUNTY CODE SECTION 8.60.040 False Alarm Regulations

Public safety and safety of peace officers require that any alarm system causing false alarms be corrected immediately.

The maximum allowable number of false alarms reported by any alarm system shall be two (2) per calendar month, or four in a calendar quarter.

After the second false alarm response in any calendar month, the Sheriff may notify the alarm system user of the violation and consequences of action by the Sheriff as set forth in this ordinance. That notification by the Sheriff may require written proof be furnished the Sheriff within ten (10) days by the alarm user that the problem causing the false alarms has been corrected.

Failure to provide proof of correction within that ten day period may be grounds, at the discretion of the Sheriff, for non-response to a signal from that alarm system until proof of correction is received from the alarm user.

The third false alarm in a calendar month, or the fifth false alarm in a calendar quarter and subsequent false alarms in that month or quarter shall be cause for the County of Mendocino to bill the alarm user for the costs incurred by the Sheriff responding to that false alarm. ~~The amount of these costs billed shall be \$25.00 (twenty-five dollars)~~ *[Mendocino County Resolution 09-279 amended the amount to \$35.00 (thirty-five dollars)]* per false alarm. Failure to pay may be grounds for non-response to that alarm by the Sheriff.

After the fourth false alarm response to an alarm system by the Sheriff in a calendar quarter, the Sheriff will notify in writing the alarm user to show cause why response to the response alarm system causing the nuisance false alarms should not be terminated. The Sheriff shall make the determination whether or not response shall be terminated.

If response to an alarm is terminated, it shall be for a period not to exceed sixty (60) days from the date the alarm user is notified of non-response by the Sheriff, or until satisfactory proof of correction of the problem causing the false alarms is furnished to the Sheriff, whichever is shorter.

In any case where the Sheriff terminates response to an alarm system under this ordinance, the alarm user shall be notified of the termination prior to the actual termination of response.

For the purposes of this ordinance, any number of false alarms in a time period from 12:00 p.m. of one day to 12:00 p.m. of the following day shall be considered one (1) false alarm.

In any case where response to an alarm system is terminated, it will be the responsibility of the alarm user to apply to the Sheriff at the end of the non-response period for response to that alarm system.

**BUSINESS/RESIDENTIAL EMERGENCY CONTACT LIST AND INTRUSION
ALARM APPLICATION
PLEASE PRINT**

Owner's Name _____

Residents/Business Name _____

Mailing and/or PO Box _____

City, State & Zip _____

Physical Address _____

Phone #'s _____ Cell# _____

EMERGENCY CONTACT LIST

List employees, friends, neighbors, etc. who can respond to our business or residence to secure it, or reset the alarm, or provide the police with a key to check the interior in case of an emergency.

(1st call out) relationship _____ (Circle) will respond has key

Name _____ ph# _____ cell# _____

(2nd call out) relationship _____ (Circle) will respond has key

Name _____ ph# _____ cell# _____

(3rd call out) relationship _____ (Circle) will respond has key

Name _____ ph# _____ cell# _____

ALARM INFORMATION

Type of Alarm:(Circle) Audible/Silent/Burglar/Holdup/Key available/dog in house/guns

Alarm Company Name _____ Ph# _____

Alarm Company Acct# _____

Alarm Application/Operation Fee per City Council Resolution No. 2002-68 \$20.00

Note: False Alarm Fee Schedules as per City Council Resolution No. 2002-68

First activation Fee \$40.00

Second activation within 30 day period \$60.00

Third and additional within 30 day period \$80.00

Owner/Applicant Signature _____ Date _____

City of Marina



MARINA POLICE DEPARTMENT

211 HILLCREST AVENUE
MARINA, CA 93933
831-884-1210; FAX 831-384-5321
www.ci.marina.ca.us

APPLICATION FOR ALARM USERS

PRINT OR TYPE ALL INFORMATION REQUIRED ON THIS APPLICATION

Business or Homeowner Information

Business Name: _____

Homeowner's Name: _____

Address: _____

Phone: _____ Cross Street: _____

Alarm Company Information

Alarm Co. Name: _____ Phone: _____

Address: _____

Account # _____ Permit Expiration: _____

Type of Alarm: _____

Turn Off Instruction: _____

Reset Code: _____ Reset Time: _____

Person who will render service and repairs during any hour of the day and night (Information must be kept current)

Name: _____ Phone: _____

Address _____

Miscellaneous Information

Key: _____ Dog: _____ Gun: _____ Risk: _____ Money: _____

Information: _____

Contact Information # 1

Name: _____ Title: _____

Address: _____

Phone: _____ Has Key? Yes ___ No ___ Will Respond? Yes ___ No ___

Contact Information # 2

Name: _____ Title: _____

Address: _____

Phone: _____ Has Key? Yes ___ No ___ Will Respond? Yes ___ No ___

Contact Information # 3

Name: _____ Title: _____

Address: _____

Phone: _____ Has Key? Yes ___ No ___ Will Respond? Yes ___ No ___

**Return completed registration form with \$20.00 made payable to the City of Marina,
211 Hillcrest Avenue, Marina, CA 93933.**

Date

Signature of Applicant

CITY OF MONTEREY

APPLICATION FOR INSTALLATION AND/OR OPERATION OF ALARM PERMIT

DEFINITIONS:

SUBSCRIBER: THAT PERSON, FIRM, CORPORATION, PARTNERSHIP OR OTHER LEGAL ENTITY REQUESTING PROTECTION OF PREMISES BY ALARM DEVICE
OWNER: THAT PERSON OWNING, OR IN FRANCHISE OR CHAIN OPERATION, MANAGING, THE PREMISES TO BE PROTECTED.
ALARM SERVICE COMPANY: THAT COMPANY WHICH MAINTAINS AND/OR SERVICES THE ALARM DEVICE ON THE PROTECTED PREMISES.

TYPE OF ALARM _____ WHERE SOUNDED _____
(BURGLAR, HOLD UP, ETC)

SUBSCRIBER INFORMATION:

NAME: _____ ADDRESS: _____
PHONE: _____ NORMAL BUSINESS HOURS: _____

OWNER INFORMATION:

NAME: _____ ADDRESS: _____ PHONE: _____

EMERGENCY CONTACT INFORMATION: (ANY PERSON LISTED MUST HAVE KEY TO PREMISES, AND MUST RESPOND UPON REQUEST OF CITY EMPLOYEES)

1. NAME: _____ POSITION: _____ PHONE: _____
2. NAME: _____ POSITION: _____ PHONE: _____

ALARM SERVICE COMPANY INFORMATION:

NAME: _____ ADDRESS: _____
BUS. PHONE _____ EMER. PHONE: _____

We, the undersigned, hereby request permission to install/operate an alarm device within the City of Monterey for the purpose of summoning the assistance of appropriate employees of the City of Monterey, and agree to hold the City harmless for any failure to respond to any activation, or apparent activation, of the alarm device, for any reason whatsoever. In addition, we acknowledge that the City of Monterey reserves the right to disconnect, order disconnection, or terminate normal response to the alarm device when, in the opinion of appropriate authority in the City of Monterey, continued operation of the alarm device would constitute a detriment to the public health, safety, and welfare.

This permit shall be subject to the fees and conditions specified in Section 22-9.1 of the Monterey City Code, and those on the reverse side. Subscriber agrees to abide by such conditions, and acknowledges reading, and having been explained, said Section. The City reserves the right to amend said section without notice to subscribers.

Signature (Subscriber) _____ Date: _____
Signature (Alarm Rep.) _____ Date: _____

Return completed application to: Monterey Police Department, 351 Madison Street, Monterey CA 93940 - Attn: Alarm Control

CONDITIONS:

Permits are issued pursuant to the terms and conditions specified in Section 22-9.1 of the Monterey City Code, and on this application form. Failure to abide by those terms and conditions is ground for revocation of the permit. All alarms installed and/or operated under a permit issued by the City of Monterey must be maintained in good order, and operated only for the intended purpose. All persons having access to the alarm system must be adequately trained to prevent false activations.

By signing this application, the subscriber acknowledges his/her agreement to abide by the conditions, provide adequate training, pay any fee applicable, subject to appeal provisions, maintain the alarm in accordance with industry standards and to surrender any permit issued upon request of appropriate authority whenever continued operation is found to constitute a detriment under Subsection (e) of Section 22-9.1 of the Monterey City Code, subject to appeal provisions.



ACTION:

APPROVED: _____
(DATE)

DISAPPROVED _____
(DATE)

REASON FOR DISAPPROVAL _____



PERMIT TERMINATED _____
(DATE)

BY _____
(SIGNATURE)

REASON FOR TERMINATION _____





PACIFIC GROVE POLICE DEPARTMENT

580 Pine Ave, Pacific Grove, CA 93950
(831) 648-3143 Fax (831) 648-3163

"Our community, your police"

Darius Engles
Chief of Police

John Nyunt
Admin Commander

John P. Miller
Patrol Commander

Alarm User's Permit Application

11.62.040 PGMC - Alarm User's Permit

Residence/Business Address: _____

Name of Resident/Business: _____

Emergency Contact Name: _____

Emergency Contact Numbers:

Home: _____

Work: _____

Cell: _____

Other: _____

Alarm Monitoring Company: _____

Alarm Monitoring Company Phone Number: _____

The undersigned person providing the information herein attests that all information provided is true and correct, and that he/she is authorized by the property owner(s) to provide this information.

Signed: _____ Date: _____

-----For Office Use Only-----

Permit Issued: Y / N

Signed: _____ Date: _____

Dates of Permit: ____ / ____ / ____ to ____ / ____ / ____

Entered into TracNet: ____ (init) Date: _____

Account Number: _____



POLICE DEPARTMENT

1480 MAIN STREET

ST. HELENA, CALIFORNIA 94574

(707) 967-2850 FAX (707) 963-8043

MICHAEL JOHNSTONE
CHIEF OF POLICE

RESIDENTIAL ALARM APPLICATION

HOME OWNERS NAME(S): _____

ADDRESS: _____

ALARM LOCATION: _____

PHONE NUMBER: _____ ALTERNATE PHONE: _____

ALARM COMPANY: _____

ALARM COMPANY ADDRESS: _____

ALARM COMPANY PHONE: _____

PERSON(S) TO BE NOTIFIED IN CASE OF ALARM ACTIVATION:

NAME: _____ PHONE #: _____

ADDRESS: _____

NAME: _____ PHONE #: _____

ADDRESS: _____

NAME: _____ PHONE #: _____

ADDRESS: _____

NAME: _____ PHONE #: _____

ADDRESS: _____

THE INSTALLATION AND OPERATION OF THIS ALARM SHALL MEET WITH THE RULES AND REGULATIONS OF THE CITY OF ST. HELENA.

THE CITY OF ST. HELENA SHALL NOT BE RESPONSIBLE FOR ANY ALARM OPERATIONS OR FAILURES.

THIS APPLICATION IS NON-TRANSFERABLE.

APPLICANT SIGNATURE: _____ DATE: _____

PERMIT FEE: _____ EXPIRATION DATE: _____

APPLICATION APPROVED BY: _____

MICHAEL JOHNSTONE, CHIEF OF POLICE

DATE

Permit # _____

LODI POLICE DEPARTMENT
ALARM PERMIT CONTACT INFORMATION UPDATE-2012

All information is confidential

Date _____

YOU ARE REQUIRED TO UPDATE YOUR CONTACT INFORMATION SHEET
ANNUALLY

Print all of the following information

Name of the Business **or** Residence: _____

Address of the Business **or** Residence: _____
Zip Code: _____

Mailing Address, if different: _____

Phone: Business **or** Residence: _____

Emergency Contact List:

List 3 persons to be called **locally** in case of an emergency at your business **or** residence. They must be able to respond within **20 minutes** with a code or key to provide police access to the facility.

	<u>Name</u>	<u>Day Phone</u>	<u>Cell or Evening Phone</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

Alarm Information:

Name of monitoring alarm company: _____

Phone # of alarm company _____

Is your alarm system monitored by the alarm company? Yes _____ No _____

Return this form with \$25.00 to:

Lodi Police Department
Alarm Program
215 W Elm Street
Lodi, CA 95240
Fax: (209) 333-5520

For Information, please contact:

Lodi Police Department
False Alarm Reduction Program
(209) 333-5547



CITY OF HALF MOON BAY

501 Main Street • Half Moon Bay, CA 94019
• (650) 726-8779 •

• Please Check One •

- BUSINESS ALARMS ONLY
HOME ALARMS ONLY
BUSINESS/HOME ALARMS

ALARM PERMIT APPLICATION

ALARM PERMIT FEE: \$50.00

Your Permit Will Not Be Issued Unless Your Form Is Filled In Completely!

Name _____

Address _____

Phone () _____ Fax () _____

Other Responsible Parties (3 local parties are required)

Name _____ Title _____ Phone () _____

Home Address _____ Cell Phone () _____

Bus Phone () _____

Name _____ Title _____ Phone () _____

Home Address _____ Cell Phone () _____

Bus Phone () _____

Name _____ Title _____ Phone () _____

Home Address _____ Cell Phone () _____

Bus Phone () _____

Alarm Agent (s)

Alarm Company _____

Contact Person _____ Title _____ Phone () _____

Address _____ Cell Phone () _____

City _____ State _____ Zip Code _____

Alarm Type: Silent Audible

I have read the alarm ordinance on the reverse side and do certify the accuracy of the above information:

Signature _____ Title _____ Date _____

• FOR CITY USE ONLY •

This application has been reviewed by the Chief of Police and is Approved Rejected _____ (INITIAL)

This application is not approved for one or all the following reasons: (Check box / boxes)

- Does not comply with standard rules & regulations.
- False, misleading or fraudulent statements have been made on the application.
- Applicant has had similar type of permit previously revoked.
- Violation of provisions of Chapter 9.10 False Alarm Systems.

FALSE ALARM CHARGES
(Municipal Code Excerpts)

9.10.170 Permit for alarm system required. It shall be unlawful for any alarm system to be installed, possessed, operated, used, serviced or maintained without a valid, unrevoked and unexpired permit therefor in accordance with the provisions of this chapter, or for an alarm business or alarm agent to make operable, service, maintain or repair an alarm system for a user unless such user has obtained a valid, unrevoked and unexpired permit from the city. (ORD. 7-93 Section 1 (part), 1993).

9.10.240 False Alarm charges. The operator of a business or occupant of residential premises shall pay such charges as may be assessed by the city for false alarms. Such charges and permit fees shall be established by resolution of the city council. False alarms emanating from alarm systems which do not have a current permit under this chapter shall pay a civil penalty of fifty dollars for each such false alarm, in addition to any other chapter required. (ORD. 7-93 Section 1 (part), 1993).

NUMBER OF FALSE ALARMS	WITH PERMIT	WITHOUT PERMIT
1st False Alarm	Warning	\$ 50.00
2nd False Alarm	Warning	\$ 50.00
3rd False Alarm	\$ 50.00	\$100.00
4th False Alarm	\$100.00	\$125.00
5th False Alarm	\$150.00	\$175.00
6th False Alarm	\$200.00	\$250.00
More than 6 False Alarms	\$200.00	\$250.00

By Law. (ORD. 7-93 Section 1 (part) any building with an alarm system is required to obtain an alarm permit. **ANNUALLY** the City is required to update our alarm files to assure fast, efficient and timely police response. This is why we ask that you fill out an **ANNUAL RENEWAL FORM**. When you obtain a permit you receive two warnings before being charged a fee. To keep false alarm responses to a minimum be sure that your alarm system is working properly. Through the Police Department Community Policing Program a free security survey is available upon request. If you are interested in this free security survey, please call the Police Department at 726-8288. If you have any question, please call Christine West at 726-8779.

ALARM PERMIT APPLICATION

Town of Hillsborough Finance Department
1600 Floribunda Avenue, Hillsborough, California 94010
(650) 375-7402

Annual Alarm Permit fee is \$60.

*All fees must be paid at time application is submitted. Permits will be mailed to residence within 2 weeks.
Renewal of the annual alarm permit fee will be included on your first water bill of each calendar year.*

*The Police Department provides direct connection to its dispatch center for monitoring services. For more
information, call the Police Department at (650) 375-7470.*

Address: _____

Resident: Last Name: _____ **First Name:** _____

Phone #-Bus: _____ **Home:** _____

Resident: Last Name: _____ **First Name:** _____

Bus Phone #: _____ **Home:** _____

Type of Alarm (Mark all that apply.)	Burglar	Fire	Panic
Silent			
Audible (indoor or outdoor)			
Visual (indoor or outdoor)			
Does the alarm automatically reset within 10 minutes?			

Where is the alarm reset unit located? _____

How is the alarm reset? _____

Alarm Company Information			
Company Name:	_____		
Address:	_____		
City:	State:	Zip Code	
Phone #:	_____		

Resident's Signature

For official use: Date alarm fee paid	_____	Permit #:	_____
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Please see reverse side for additional alarm information.

GENERAL ALARM INFORMATION

The following alarm related items are required by the Town of Hillsborough:

- ❖ All residents who own alarm systems are required to maintain an alarm permit which must be renewed annually. You will be billed for your renewal with your first water bill of the calendar year.
- ❖ Alarms must automatically reset themselves after 10 minutes.
- ❖ No sirens may be installed. (Bells are allowed.)
- ❖ Alarm permits must be posted at the residence (ideally in a location where all of your family members can quickly find the permit number.)
- ❖ A battery back-up unit must be maintained with the system.

It is your responsibility to maintain current personal information with the Police Department, including the names and phone numbers of persons to contact when you are not available. Other information concerning hazards at your residence will assist officers when responding to emergencies.

You have the option of leaving a house key with the Town that police officers can use to secure your home in your absence.

If no one will be residing at your home for any period of time, you should notify the Police Department and leave the name of a person who can respond to your home in the event of any emergency, and notify the Department about alarm malfunctions.

Police Officers trained as alarm specialists will consult with you to identify security concerns at your residence. While these officers do not perform repairs, they can assist with the identification of problems, and will work with you to prevent false alarms. Call 375-7472 any time of day to arrange for an appointment with an alarm specialist. This is a free service.

To avoid false alarm citations, call the Police Department before you test your alarm system.

FALSE ALARM FEES

For residents who fail to obtain a permit and police officers respond to your home as a result of a false alarm, you will be invoiced for the actual cost of the police response and an alarm permit.

For permit holders, the Town of Hillsborough's policy is to impose no fees for the first 2 false alarm citations within a calendar year and then to observe a progressive fee schedule as follows:

3 rd False Alarm Citation	\$100
4 th False Alarm Citation	\$100
5 th False Alarm Citation	\$100
6 th False Alarm Citation	\$200

After 6 false alarm citations, residences monitored directly by the Department shall be disconnected from the Town's monitoring service for 6 months. After paying a reinstatement fee, residences can be reconnected to the Town's monitoring service. Late charges and penalties may be assessed to delinquent accounts.



Please complete this form and return it with your payment
BURGLAR ALARM RENEWAL AND NEW PERMIT FORM
 Santa Rosa Police Department ♦ 965 Sonoma Avenue, Santa Rosa, CA 95404
 Alarm Permit Phone # 707-543-3616

FILE / PERMIT # _____

FOR RESIDENTIAL AND COMMERCIAL PERMITS

Name (of Resident or Business): _____	Premise Telephone #: _____
Address of Alarm (Include Suite# and Zip Code): _____	
Mailing Address (If different from above): _____	
Name of Person Responsible For Payment of Fees: _____	Responsible's Telephone #: _____

FOR COMMERCIAL ALARMS ONLY

Business Owners Full Name: _____
Ownership Type: _____
Owner's Address: _____
Has business changed ownership within past 12 months: (please circle one) Yes or No

ALARM COMPANY INFORMATION

Alarm Company Name: _____	Telephone # _____
Alarm Monitoring Service Name: _____	Telephone # _____
Type of Alarm: (Circle all that apply): Commercial Residential Audible Fire Silent Hold-Up/Panic Alarm	

LIST THREE PERSONS WITHIN A 30 MINUTE DRIVE WHO CAN BE CONTACTED IN AN EMERGENCY
 If you have an alarm monitoring service, please give us the same names and numbers they have for your alarm

Name # 1: _____	Telephone # _____
Name # 2: _____	Telephone # _____
Name # 3: _____	Telephone # _____

Please Print Name: _____ Signature: _____

See Reverse Side for Ordinance Summary and Fee Schedule

SUMMARY OF ALARM ORDINANCE

1. All alarm systems shall be installed in accordance with all applicable standards and requirements of the building code and applicable established standards as required by the City of Santa Rosa
2. All audible alarm systems, when activated, shall automatically cease transmitting within 20 minutes.
3. Upon request of the police department, a user or designated representative shall respond within one hour
4. It is unlawful to use any taped or otherwise recorded message to report a police or fire emergency to the City or Santa Rosa Communications Center.
5. It is a misdemeanor for any person to install, possess, operate, use, service, or maintain any alarm system without a valid permit. In addition, permits are non-transferable.
6. Permits may be denied on the following grounds:
 - a. The alarm system is deficient.
 - b. The applicant or applicant's agent has knowingly made any false, misleading fraudulent statements of material fact.
 - c. Applicant has had a similar type permit previously revoked
 - d. Violation of any of the provisions of this chapter.
7. Permits issued pursuant to this division shall be renewed annually.
8. Any change in ownership in a business shall require a new permit.
9. Permits shall be posted on the premises in a conspicuous location.
10. The permittee shall be responsible for any service, test, repair, maintenance, adjustment, or installation which might actuate a false alarm on a particular alarm system.
11. Newly installed alarms shall be granted a 15-day grace period in which to rectify system problems.
12. Grounds for revocation are:
 - a. Violation of any of the provisions of this chapter.
 - b. Excessive false alarms as defined by established regulations.
 - c. Any false, misleading, or fraudulent statement of material fact.
 - d. Failure of the permittee or representative to respond within one hour when requested by the police department.
13. If a permit is revoked, the permittee has ten days following such notice to offer evidence to the Chief of Police why it should not be revoked.
14. Any person whose application for a permit is denied, or whose permit is revoked, may appeal to the City Council within 15 days from the date of the mailing of the notice.

RULES & REGULATIONS

There shall be a recovery fee on each delinquent false alarm and permit fee account which is referred to a collection agency for collection. The amount of the recovery fee in each case shall be equal to the total of all cost and charges to the City made by the collection agency for recovery of the delinquent fee account.

Ten or more false alarms in any 12-month period is an excessive number, a public nuisance, and shall be grounds for the revocation of the permit.

The extra charge fee for each and every false alarm in excess of one received by the City in any 12-month period shall be:

2 nd false alarm \$125.00	6 th false alarm \$225.00
3 rd false alarm \$150.00	7 th false alarm \$250.00
4 th false alarm \$175.00	8 th false alarm \$275.00
5 th false alarm \$200.00	9 th false alarm \$300.00

FALSE ALARM PENALTY - 10th and each subsequent alarm - \$1000.00

Residential Permit \$10.00	Business/Commercial Permit \$15.00
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**Stanislaus County Sheriff's Office
Residential / Commercial Alarm
Registration Form**

LOCATION OF THE ALARM (Please type or print clearly)

Alarm No. _____

Name of Business: _____
or
Name of Resident: _____
Last First

ALARM:

Address: _____
Number Street Apt/Suite
City State Zip Code Phone Number

MAILING ADDRESS: (If different from above)

Address: _____
Number Street/P.O. Box Apt/Suite
City State Zip Code Phone Number

Name & Phone number of company that monitors your alarm:

Name: _____

Phone Number: _____

*Please send registration fee of \$20.00, payable to:

Stanislaus County Sheriff's Department

Mail to: STANISLAUS COUNTY SHERIFF'S OFFICE
Attn: Alarm Clerk
250 E. Hackett Road
Modesto, CA 95358

FOR OFFICE USE ONLY (S _____)
DATE RECEIVED: _____ MO DAY YR
AMT RECEIVED: \$ _____
CHECK / MO: # _____
CASH/RECEIPT: # _____

PLEASE INCLUDE THIS FORM WITH YOUR CHECK.
If you have any questions, contact the Alarm Clerk at 525-7039.

Stanislaus County charges a returned check fee of \$20.00 in addition to the amount of the check.

FAILURE TO RETURN THIS REGISTRATION FORM MAY RESULT IN YOUR ALARM BEING PLACED IN OUR COMPUTER SYSTEM AS CLOSED, DISCONNECTED OR A NON-RESPONSE ALARM.

NOTICE TO ALARM PERMIT APPLICANTS

Marysville Municipal Code 5.50 regulates burglary and robbery alarms, authorizes imposition of permit fees and establishes fees for false alarms.

Every person who has a burglary and/or robbery alarm system must file an application for, and receive a permit from the Chief of Police. **The fee for the permit is forty dollars (\$40.00), and is valid for three years.**

Restrictions and regulations of the permit area as follows:

1. The permit shall be issued to the person who is legally in possession of the property protected by the alarm and the permit must be displayed on the premises of the protected property. (initials: ___)
2. The permit cannot be transferred without the written consent of the Chief of Police. (initials: ___)
3. The permit may be revoked for any violation of MMC 5.50, when the alarm activates 10 false alarms within a fiscal year or for failure to pay a service fee within 60 days of billing (initials: ___)
4. The permittee shall be charged a service fee for any false alarm which the Police Department responds to, at a rate of \$75.00 for the fourth false alarm and \$125.00 for each false alarm thereafter, within a fiscal year (July through June). (initials: ___)
5. Audible alarms must have an automatic shut-off that deactivates the sound after 30 minutes. (initials: ___)
6. Alarms which emit a siren sound or automatically dial the Police Department or telephone company are not permitted. (initials: ___)
7. Alarm permits are subject to reasonable conditions imposed by the Chief of Police. (initials: ___)
8. **Permittee must immediately notify the Police Department of any changes in information contained within the application which occurs after issuance of the permit.** (initials: ___)

I, the applicant for an alarm permit, have read and understand the aforementioned restrictions, regulations and possible fees associated with a burglary and/or robbery alarm system.

(Applicant's signature) (date)

ALARM CERTIFICATION: for new applications or new alarm systems only

NAME OF ALARM SERVICING COMPANY: _____

I hereby certify that I have inspected the alarm system for which this application applies and have found it to be free from defects. This alarm is in conformance with the requirements of Marysville Municipal Code Section 5.50.120.

NAME OF ALARM TECHNICIAN _____ DATE: _____

SIGNATURE OF TECHNICIAN _____

MARYSVILLE POLICE DEPARTMENT
316 6th Street/ PO Box 670 - Marysville, CA 95901

BURGLARY/ROBBERY ALARM PERMIT APPLICATION
(For alarms located within the City of Marysville only)

The requested permit is for a: Business Residence

BUSINESS OR HOME OWNER NAME _____

ADDRESS (where the alarm is located): _____

HOMEOWNER OR MANAGER: _____
(Name of responsible person for Residence or Business)

TELEPHONE #: _____
(Number to Residence or Business)

ALARM INFORMATION:

TYPE OF ALARM: Check all of the boxes appropriate to your alarm system. *At least two boxes should be checked; one for the type of protection (burglar or robbery) and one for the method generated (audible or silent):*

- Burglary - when no one is home Robbery - "panic button"
- Silent - a non-audible signal received at a monitoring station Audible - an audible alarm warning

Name of Alarm Company _____
Phone Number for Alarm Company _____

LIST RESPONSIBLE PERSON(S) WHO WILL RESPOND TO AN ALARM in order of preferred contact:

<u>NAME</u>	<u>ADDRESS & CITY</u>	<u>PHONE NUMBER</u>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

PLEASE READ AND INITIAL ALL SECTIONS OF THE "NOTICE TO ALARM PERMIT APPLICANTS" ON THE FOLLOWING PAGE OF THIS APPLICATION. BE SURE TO COMPLETE, SIGN AND INITIAL THIS APPLICATION IN ALL AREAS, OR IT WILL BE RETURNED TO APPLICANT FOR COMPLETION, WHICH WILL RESULT IN A DELAY IN RECEIVING YOUR PERMIT FOR USE.

-- FOR DEPARTMENT USE ONLY--		
Application Date: _____	Permit # _____	[] New
		[] Renewal
Expiration date: 6-30-_____ /or/ 12-31-_____		[] Fee Paid