



UPPER PERK POLICE DEPARTMENT

Application for Business Alarm Registration

No Alarm - Emergency Contact Info Only

PLEASE CHECK ONE: New Application Update Information

Office Use Only -- Permit #:

APPLICANT'S INFORMATION

Please Type or Print

Company Name		Date
Business Address, City, State, Zip		Business Phone
Mailing Address, City, State, Zip (if different than above)		Phone

◆ There is a yearly \$50 fee for Business Alarm Registration
Please make checks payable to the Upper Perk Police; include with application ◆

PERSONS TO CONTACT IN CASE OF AN EMERGENCY

NAME 1.	TITLE:	
Home Phone (including area code)	Cell Phone (including area code)	Work Phone (including area code)
NAME 2.	TITLE:	
Home Phone (including area code)	Cell Phone (including area code)	Work Phone (including area code)
NAME 3.	TITLE:	
Home Phone (including area code)	Cell Phone (including area code)	Work Phone (including area code)

TYPE OF PREMISES TO BE PROTECTED

(i.e., office building, computer center, medical, etc.)

ALARM COMPANY INFORMATION

Alarm Company Name	Office Phone	Control Center Phone		
Address	City, State	Zip		
Type of System:	<input type="checkbox"/> Burglar	<input type="checkbox"/> Robbery	<input type="checkbox"/> Fire	<input type="checkbox"/> Central Monitoring
	<input type="checkbox"/> Emergency Button	<input type="checkbox"/> Local	<input type="checkbox"/> Other:	

I agree to abide by the provisions of Chapter 46 - False Alarms of the Borough of Pennsburg Codified Ordinances (hereinafter Alarm Ordinance) and all rules and regulations of the Upper Perk Police and/or Fire in the installation, maintenance, and operation of my alarm system.

I agree and acknowledge that the Borough of Pennsburg makes no representations, express or implied, that my alarm system is acceptable or fit for any particular purpose and I voluntarily waive and release the Borough of Pennsburg and its employees, officers and agents, from any and all liability with respect to the operation of my alarm system or the approval, denial, or revocation of my alarm permit.

I fully understand that response to an alarm signal by the Upper Perk Police and/or Fire, may require forcible entry into the premises to ascertain the security of persons and/or property. I authorize such action and agree to save and hold harmless the Borough of Pennsburg and its employees, officers and agents, from any damage resulting therefrom.

I agree to pay all charges pursuant to the alarm ordinance with thirty (30) days when they become due. I agree to provide written notification to the Upper Perk Police within ten (10) days of a change in the information on this application. I understand that my permit may be subject to termination for failing to do either of the above.

I understand that my permit is not transferable and that it will be kept on file with the Upper Perk Police. A copy of the alarm ordinance is available for my review at the Borough of Pennsburg located at 76 W. 6th Street, Pennsburg, PA 18073 and at <https://ecode360.com/PE0571> Chapter 46 - False Alarms.

Applicant's Signature

Date

Applicant's Printed Name

Title

**Forward completed application to: Upper Perk Police Department
Attn: Admin Assistant
88 W. 6th Street
Pennsburg, PA 18073**

Office Use Only

Application is: Approved by: _____ Denied by: _____ Date: _____

Reason, if denied

Date