

Official Use Only Alarm Permit # _____ Fee Paid \$ _____

**ROTTERDAM POLICE DEPARTMENT
ALARM PERMIT APPLICATION**

Date _____

Check one: _____ Residential _____ Commercial _____ Bank _____ Exempt

Subscriber Name _____ Phone _____

Address _____ City _____ State _____ Zip _____

Alarm Installer's Name _____

Installer Phone # _____ Installer NYS License # _____

Type of Alarm: (Check all that apply)

- | | |
|------------------------|-----------------------------|
| 1. Fire _____ | 5. Other Water Hi/Low _____ |
| 2. Holdup Alarm _____ | 7. Co Detector _____ |
| 3. Burglar Alarm _____ | 8. Reset _____ |
| 4. Medical Alarm _____ | |

REPORTING FORMAT TO RPD 3X1 ONLY!

POWER AC _____ BATTERY BACKUP _____

Check type of termination that applies: Entire Year or New Registration Date: **January 1 thru June 30:**

Annual Fee: **PLEASE ADD \$10 NEW ALARM REGISTRATION FEE (one time only)** = \$10.00

A _____ Residential terminating at Sch'dy County UCC \$60+\$20 Permit+\$4.80 tax = \$84.80

B _____ Outside Audible Only \$40+\$20 Permit+\$3.20 tax = \$63.20

C _____ Independent Alarm Company \$20 Permit = \$20.00

D _____ Commercial terminating at Sch'dy County UCC \$140+\$20 Permit+\$11.20 tax = \$171.20

TOTAL DUE \$ _____

Check type of termination that applies: **Partial Year New Registration: July 1 thru December 31:**

A _____ Residential termination at Sch'dy County UCC \$30+\$10 Permit+\$10 New Registration+\$2.40 tax = \$52.40

B _____ Outside Audible Only \$20+\$10 Permit+\$10 New Registration+\$1.60 tax = \$41.60

C _____ Independent Alarm Company \$10.00 Permit+\$10 New Registration = \$20.00

D _____ Commercial terminating at Sch'dy County UCC \$70+\$10 Permit+\$10 New Registration+\$5.60tax = \$95.60

TOTAL DUE \$ _____

MAKE CHECKS PAYABLE TO: TOWN OF ROTTERDAM

Approved _____ Chief of Police

Independent Alarm Company	Name _____	Phone # _____
	Address _____	
	City _____	State _____ Zip _____

ROTTERDAM POLICE DEPARTMENT ALARM CONTACT SHEET

Official Use Only Alarm Permit # _____
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Subscriber's Name _____

Address _____

Phone # _____

In case of alarm, I request that the following persons be contacted in my absence. They have access to the premises described above, and can reset the emergency alarm system. Names, addresses and telephone numbers for the contacts below must be complete.

1. Name _____ Phone # _____

Address _____

City _____ State _____ Zip Code _____

2. Name _____ Phone # _____

Address _____

City _____ State _____ Zip Code _____

3. Name _____ Phone # _____

Address _____

City _____ State _____ Zip Code _____

The Town of Rotterdam shall take every reasonable precaution to assure that emergency alarm signals received by the Town are given appropriate and immediate attention. Nevertheless, the Town shall incur no liability for any defects in operation of emergency alarm systems, nor for any failure to respond appropriately, nor for any errant response upon receipt of any emergency alarm signal, nor for the failure or defect of any licenses pursuant to Chapter 71 of the Town of Rotterdam Code with respect to the installation, operation or maintenance of equipment, the transmission of alarm signals or the relaying of such signals. In the event that the Town of Rotterdam finds it necessary to disconnect a defective automatic or signaling device, the Town shall incur no liability thereby.

Subscriber's Signature _____ Date _____

ALARM CONTACTS:

All alarm permit holders are required to supply the Rotterdam Police Department with the names, addresses and telephone numbers of at least three persons who have access to the alarmed premises, and who can respond to the scene to reset the alarm.

FALSE ALARMS:

A "false alarm" is an alarm signal necessitating response by the police or fire department where an emergency situation does not exist. A persistent false alarm is any alarm system that generates more than eight (8) false alarms within each calendar year. For nine (9) and over the fee is \$100 each.

False alarms arising from Acts of God, natural disaster, or other causes not under the immediate control of the alarm subscriber are not considered false alarms. Malfunctions of alarm equipment are considered false alarms. A warning notice will be generated by the police department to the alarm subscriber upon the fourth false alarm in any calendar year, to advise that the next in all subsequent false alarms will be charged. Should your emergency alarm system activate at a time when an emergency situation does not exist, you should contact the Unified Communication Center by telephone at **630-0911**, for security reasons give the police dispatcher your permit number as verification of your identity, and advise them that it is a false activation of your alarm system. False alarm circumstances like this, when the above procedure is followed does not count against the alarm subscriber, and no penalties will arise. A response may still be sent to verify. If the alarm permit number is not given or given incorrectly, it shall be a sign that this is an active alarm, and a response will be sent.

ALARM SYSTEM TESTING:

Please notify the Unified Communication Center by telephone at **630-0911** prior to testing your alarm system. For reasons of security, the person making the notification must give the police dispatcher the alarm permit number as verification of the test. If the permit number is not given or given incorrectly, it shall be a sign that it is an active alarm, and a response will be sent. The police department shall make every effort to accommodate your testing request. However, if a situation arises inside the communications area making the testing of your alarm system a hindrance to an actual emergency in progress, the test will be postponed until the emergency situation is mediated.

ALARM INSTALLERS/SUPPLIERS:

To insure that all installers servicing Rotterdam residents remain licensed and qualified, all alarm installers must now register on an annual basis with the Town of Rotterdam Police Department. There is no fee for this registration. However, a New York State Alarm Installers License Identification Number is required.