

**BOROUGH OF KUTZTOWN
APPLICATION FOR
BUSINESS ALARM DEVICE PERMIT**

APPLICATION DATE: ____/____/____

NAME OF PERSON COMPLETING APPLICATION: _____

PHONE: (____)_____ E-MAIL: _____

DATE OF BIRTH OF PERSON COMPLETING APPLICATION: ____/____/____

HOME ADDRESS: _____

BUSINESS NAME: _____

BUSINESS ADDRESS: _____ PHONE: (____)_____

LOCATION OF ALARM: _____

AUTHORIZED INDIVIDUALS

Note: A minimum of three (3) names is required for a business, including applicant. All persons must have the knowledge and ability to properly activate and deactivate the alarm. The below persons are who the police department will contact in the event of an Alarm Device activation or emergency at the business.

*** Phone number should be their best 24/7 contact number.**

1. NAME: _____ PHONE: (____) _____

HOME ADDRESS: _____

2. NAME: _____ PHONE: (____) _____

HOME ADDRESS: _____

3. NAME: _____ PHONE: (____) _____

HOME ADDRESS: _____

ALARM DEVICE

DATE INSTALLED: _____ ALARM SERVICE CO.: _____

ALARM CO. ADDRESS: _____ PHONE: (____) _____

DESCRIPTION OF ALARM DEVICE: _____

DEVICE IS (CHECK ALL THAT APPLY): BURGLAR PANIC FIRE HOLDUP OTHER

ALERT TYPE (CHECK ALL THAT APPLY): SILENT (NOTIFIES ALARM CO.) AUDIBLE BOTH

Permit# Assigned



ALARM DEVICE PERMIT APPLICATION

NOTICE: Chapter 60, Section 60-5 (A) of the Code of the Borough of Kutztown, provides that in case of a NEW Alarm Device installation, a thirty (30) day testing period shall apply to allow the alarm service company and the applicant the time to adjust the system as necessary to prevent any later false alarm indications. During this thirty (30) day period, False Alarm Charges shall not be assessed.

In addition, permit holders are allowed one (1) False Alarm indication per calendar month, for which there shall be no False Alarm Charge assessed.

Any additional False Alarm indication within that calendar month will result in a False Alarm Charge being assessed as per Chapter 60, Section 60-5 (B) of the Code of the Borough of Kutztown.

Alarm Device Permits MUST BE RENEWED ANNUALLY within thirty (30) days prior to the expiration date of the Alarm Device Permit. Continued operation of an Alarm Device Permit without a currently valid Alarm Device Permit will constitute a violation of Chapter 60, Section 60-2 (A) of the Code of the Borough of Kutztown and may result in the assessment of fines and court costs exceeding \$600.00.

- | | | | | |
|----|---|-------------|-----|----|
| 1. | Does the Alarm Device transmit a recorded message? | (Check one) | YES | NO |
| 2. | If the above is YES, is the message clear and intelligible? | (Check one) | YES | NO |
| 3. | Does the Alarm Device activate an audible bell, siren or other sound-making device on or near the premises? | (Check one) | YES | NO |
| 4. | If above is yes, does the audible bell, siren or other sound-making device deactivate after a maximum of twenty (20) minutes? | (Check one) | YES | NO |

PLEASE REMEMBER TO ENCLOSE YOUR \$25.00 APPLICATION FEE TO AVOID ANY DELAY IN RECEIVING YOUR PERMIT. ANNUAL RENEWAL APPLICATIONS ARE FREE OF CHARGE IF SUBMITTED WITHIN THIRTY (30) DAYS PRIOR TO THE EXPIRATION DATE OF THE ALARM DEVICE PERMIT. **E-MAIL WILL BE PRIMARY COMMUNICATION METHOD FOR RENEWALS.**

I HERE BY CERTIFY AS THE APPLICANT THAT THE ALARM IS IN COMPLIANCE WITH BOROUGH OF KUTZTOWN CODE AND THAT ALL INFORMATION CONTAINED HERE IN IS ACCURATE TO THE BEST OF MY KNOWLEDGE.

Signature / Date

(Co-owner) Signature / Date

**BOROUGH OF KUTZTOWN
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PERMISSION TO ENTER BUSINESS

I, _____, being the owner or person legally in control of the business located at:

_____,
hereby acknowledge that I have a Constitutional Right that prevents police officers from entering and searching my business without a duly authorized search warrant.

I further acknowledge my right to be free from unreasonable searches and seizures and, **IN THE EVENT OF AN ALARM DEVICE ACTIVATION AT MY BUSINESS ONLY**, I knowingly, voluntarily and intelligently give my permission to the Police Officers of the Kutztown Borough Police Department and/or any other Police Officer assisting an officer or Officers of the Kutztown Borough Police Department to enter my business for the sole purpose of checking the security of the business and the safety of its occupants.

The Police Officers who have entered my business to check on the security of my property and the safety of its occupants have my permission to search all areas of the business for this purpose only.

I am giving the Police Officers of the Kutztown Borough Police Department written permission to enter and conduct a security check of my business voluntarily and without any threats or promises of any kind. I hereby revoke this authorization upon expiration of my Alarm Device Permit.

I also understand that if I decline to sign this **PERMISSION TO ENTER BUSINESS** form, Police Officers **WILL NOT** perform any security checks inside of my business in the event of an Alarm Device activation UNLESS life threatening circumstances demand that those Officers make entry.

Signature of Owner/Person Legally in Control of Business

Printed Name of Owner/Person Legally in Control of Business

Date

Witness

Printed Name of Witness

Date