



**CITY OF HARTFORD**  
**EMERGENCY SERVICES & TELECOMMUNICATIONS**  
 253 High Street  
 Hartford, CT 06103  
 (860) 757-4050

**HARTFORD**  
 \*HAS IT

**APPLICATION FOR ALARM PERMIT**

Notice: Pursuant to the Hartford False Alarm Ordinance Section 25-14, every owner or operator must apply for a permit to operate an alarm unit in the city. This information is CONFIDENTIAL and will not be released outside this agency except pursuant to court order. Please Print Clearly.

ALARM PERMIT NO: \_\_\_\_\_  
 (Office use only)

**I. ALARM PREMISES (Location of alarm system):**

|  |   |
|--|---|
| ADDRESS:   | TELEPHONE NUMBER AT ALARMED LOCATION:     |
| CITY, STATE, ZIP:  | NON-RESIDENTIAL, BUSINESS OR ENTITY NAME: |
| NATURE OF PREMISES: <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> NON-RESIDENTIAL <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> OTHER _____<br><input type="checkbox"/> PRE—EXISTING ALARM <input type="checkbox"/> NEW INSTALLATION - IF SO, PLEASE PROVIDE PERMIT # _____ |   |

**II. APPLICANT (Person or organization responsible for alarm system):**

|                   |                 |                          |             |
|-------------------|-----------------|--------------------------|-------------|
| NAME:             | DAYTIME NUMBER: | EVENING NUMBER:          | CELL PHONE: |
| MAILING ADDRESS:  |                 | DRIVER'S LICENSE NUMBER: |             |
| CITY, STATE, ZIP: |                 |                          |             |

**III. ALARM SYSTEM, MONITORING AND INSTALLATION COMPANY:**

|  |   |
|--|---|
| KINDS OF ALARMS AT PREMISES (CHECK ALL THAT APPLY):<br>BURGLAR ALARM <input type="checkbox"/> FIRE <input type="checkbox"/> PANIC <input type="checkbox"/> IS IT AUDIBLE OUTSIDE? <input type="checkbox"/> OR SILENT? <input type="checkbox"/> OTHER TYPE <input type="checkbox"/> _____ |   |
| ALARM MONITORING COMPANY :   | ALARM INSTALLATION/MAINTENANCE COMPANY :        |
| ALARM MONITORING COMPANY ADDRESS:  | ALARM INSTALLATION /MAINTENANCE COMPANY ADDRESS |
| TELEPHONE NUMBER:  | TELEPHONE NUMBER:                               |
| FAX NUMBER:  | FAX NUMBER:                                     |
| E-MAIL ADDRESS:  | E-MAIL ADDRESS:                                 |

**IV. AUTHORIZED KEY HOLDERS:**

A KEY HOLDER is someone you trust who, in your absence and within 20 minutes of being notified, will arrive at your premises after an alarm activation in order to secure the property and/or assist the Police Department in determining the cause of the alarm.

|                        |                         |
|------------------------|-------------------------|
| NAME, FIRST KEYHOLDER: | NAME, SECOND KEYHOLDER: |
| DAY TELEPHONE:         | DAY TELEPHONE:          |
| EVENING TELEPHONE:     | EVENING TELEPHONE:      |
| CELL PHONE:            | CELL PHONE:             |

Upon receipt of completed application and registration fee, a registration number shall be assigned to the Alarm System. Failure to register an Alarm System will result in a \$99.00 fine. Once a registration number has been issued, any changes to permit information should be submitted in writing to the Department of Emergency Services within 10 days.

I hereby certify that, to the best of my knowledge, the above information is correct. I also agree to accept full responsibility for the alarm device within the terms of the ordinance.

Signature \_\_\_\_\_ Date \_\_\_\_\_

## INSTRUCTIONS FOR ALARM PERMIT APPLICATION

Failure to correctly and fully complete this form will delay your registration. This form is to be used to register burglar/robbery, panic/duress and fire systems. *There is a \$15.00 fee to register your alarm.* All information must be typed or printed and is confidential.

- I. **Alarm Applicant Information:** Indicate the complete name of the person responsible for the alarm operation or name of establishment.
  - (a) Indicate your drivers license number in the space provided.
  - (b) Indicate the mailing address of the applicant, if different from alarm address.
- II. **Alarmed Premises:** Indicate the complete address where alarm is located if different from applicant address.
  - (a) Indicate any unusual circumstances that should be considered when responding to an alarm at the alarmed location, i.e. watch dog, security guard, hazardous materials, weapons, etc
- III. **Alarm Monitor / Installer:** Indicate the name, phone number and fax number for the alarm company that monitors, sold, installed, maintains your alarm system.
- IV. **List two (2) persons to contact in the event of an alarm:** List the name and phone number of two persons who have agreed to:
  - (a) Receive notification of an alarm activation at any time.
  - (b) Respond to the alarm site within 20 minutes of notification; and
  - (c) Grant access to the alarm site and deactivate the alarm system if such becomes necessary.

### PENALTIES

The ordinance establishes a fine schedule for repeated false alarms which require a response from police & fire services. Fines and false alarms are based on a calendar year starting from your registration date.

#### FINE SCHEDULE:

| <u>Number of False Alarms</u> | <u>Fine</u> |
|-------------------------------|-------------|
| 1                             | No Fine     |
| 2                             | No Fine     |
| 3                             | \$ 45.00    |
| 4 or more                     | \$ 90.00    |

For alarm users who have not registered their systems, a ninety-nine dollar (\$99.00) fine will be charged. In addition to the non-registration fee, any operator of a non-permitted alarm system will be subject to a citation and assessment of a ninety dollar (\$90.00) fine for each false alarm dispatch. The total fine for an alarm user who has yet to register their system and who has had a false alarm occurrence is one hundred eighty nine dollars (\$189.00).

**Mail completed Application Form with a \$15.00 check or money order made payable to:**  
City of Hartford  
Department of Emergency Services & Telecommunications  
253 High Street  
Hartford, CT 06103

If you have questions, feel free to contact our office at (860) 757-4050.