

Alarm By-Law Permit Application

By-Law Chapter 6, 6-13

Alarm Owner's Name: _____ Date: _____

Alarm Owner's Address: _____

Alarm Address: _____ Phone # : _____

Alarm Company: _____ Phone # : _____

Alarm Co. Address: _____ Phone # : _____

Person responsible for proper maintenance and operation of alarm system and payment of fees assessed under this By-law:

Name: _____ Phone # : _____

Address: _____

Alarm site: Residence () Business () Apartment ()

Alarm purpose: Burglar () Medical () Other ()

Professionally installed? YES () NO ()

Date last maintained : _____ By whom? _____

Does your system have auto cut-off after at least 15 minutes? YES () NO ()

Is your alarm serviced at least annually? YES () NO () By Whom?

Company Name: _____ Phone # : _____

Address: _____

List at least 2 persons to notify in the event of trouble with the alarm system or property:

Name: _____ Phone # : _____

Address: _____

Name: _____ Phone # : _____

Address: _____

(OVER)

THIS APPLICATION MUST BE FORWARDED TO THE MARBLEHEAD POLICE DEPARTMENT.

I HAVE READ AND UNDERSTAND THE ALARM SYSTEM BY-LAW SUMMARY OF THE BY-LAW OF THE TOWN OF MARBLEHEAD AND UNDERSTAND THAT THE COMPLETE TEXT OF THE BY-LAW IS AVAILABLE UPON REQUEST AT THE MARBLEHEAD POLICE DEPARTMENT AND ONLINE AT www.marblehead.org with links to By-law Chapter 6 . ANY QUESTIONS I MAY HAVE CAN BE ANSWERED BY OFFICERS AT THE POLICE DEPARTMENT.

I UNDERSTAND AND AGREE THAT NEITHER THE TOWN OF MARBLEHEAD NOR ITS AGENTS, SERVANTS OR EMPLOYEES SHALL BE HELD LIABLE FOR ANY INJURY OR DAMAGE TO ANY PERSON OR PROPERTY AS A RESULT OF RESPONDING TO OR FAILURE TO RESPOND TO AN ALARM. I FURTHER AGREE TO INDEMNIFY, HOLD HARMLESS AND DEFEND THE TOWN OF MARBLEHEAD AND ITS AGENTS, SERVANTS AND EMPLOYEES FROM AND AGAINST ANY AND ALL CLAIMS OF ANY PERSON RESULTING FROM THE RESPONSE TO OR FAILURE TO RESPOND TO AN ALARM.

SIGNED: _____ DATE: _____