



MONTEREY COUNTY, CALIFORNIA  
**SHERIFF'S OFFICE**

Proudly protecting the community since 1850.

1414 Natividad Road, Salinas CA 93906 ■ (831) 755-3700 ■ www.montereysheriff.org

# NEW ALARM PERMIT APPLICATION

<b>OFFICE USE ONLY</b>
<b>REGISTRATION NUMBER</b>

<b>ABOUT THIS FORM</b>
<p>The intention of the application is to provide citizens with the best possible service that requires a response by the Monterey County Sheriff's Patrol Personnel. Fill in the application COMPLETELY and check boxes where appropriate. <b>PANIC ALARMS PROHIBITED.</b> Return the completed application to the Office of the Sheriff – Alarm Unit, 1414 Natividad Road, Salinas, CA 93906 - <b>with the application fee of \$50.00 made out to MCSO – Alarm Unit.</b></p>

<b>NEW SUBSCRIBER INFORMATION</b> (The information supplied below is used by County Comm/911 and Deputies responding to alarm calls.)			
<input type="checkbox"/> NAME OF BUSINESS	LAST	FIRST	MIDDLE INITIAL
<input type="checkbox"/> NAME OF RESIDENCE (CHECK ONE)			
ADDRESS OF ALARM BUSINESS/RESIDENCE (NO P.O. BOXES)		CITY	STATE ZIP
MAILING ADDRESS (IF DIFFERENT THAN ABOVE)		CITY	STATE ZIP
PHONE NUMBERS		E-MAIL ADDRESS	
TYPES OF BUSINESS AT THIS ADDRESS		NEAREST CROSS STREET	
THE HOUSE/BUSINESS NUMBERS ARE POSTED			
<input type="checkbox"/> ON THE BUILDING		<input type="checkbox"/> DRIVE WAY ENTRANCE	<input type="checkbox"/> OTHER _____
GATE CODE/COMBINATION AND/OR INSTRUCTIONS			

<b>EMERGENCY CONTACTS</b>			
Do not list yourself or alarm company. They are contacted ONLY if owner/resident is unavailable. List the names of two (2) people living within 45 minutes of the alarmed location that will respond to the business/residence in case of an emergency. These "Responding Agents" shall have the authority to assume responsibility for the security of the business or resident if needed.			
1. NAME		2. NAME	
HOME PHONE	WORK PHONE	HOME PHONE	WORK PHONE

<b>ALARM COMPANY INFORMATION</b>	<b>ALARM MONITORING CO.</b> (If different than alarm co.)
NAME	NAME <b>ALARM RELAY</b>
ADDRESS	ADDRESS <b>111 S. MARSHALL AVE. EL CAJON, CA.</b>
PHONE	PHONE <b>(800) 762-9964</b>

<b>ALARM EQUIPMENT INFORMATION (PANIC ALARMS PROHIBITED)</b>				
<input type="checkbox"/> NEW ALARM <input type="checkbox"/> UPGRADED ALARM <input type="checkbox"/> EXISTING ALARM			INSTALLATION DATE	
NAME OF PREVIOUS OWNER (IF ALARM SYSTEM ALREADY EXISTS)				
THE LOCATION IS EQUIPPED WITH THE FOLLOWING TYPE OF ALARM (PLEASE CHECK ALL BOXES THAT APPLY)				
RESIDENTIAL: <input type="checkbox"/> NEW ALARM <input type="checkbox"/> UPGRADED ALARM COMMERCIAL: <input type="checkbox"/> BURGLAR <input type="checkbox"/> HOLD UP <input type="checkbox"/> SILENT <input type="checkbox"/> AUDIBLE		TYPE OF CONNECTION: <input type="checkbox"/> LOCAL <input type="checkbox"/> REMOTE HOW IS ALARM RESET: <input type="checkbox"/> AUTO <input type="checkbox"/> MANUALLY		
IF THE ALARM SYSTEM IS LOCATED AT A BUSINESS OR PART-TIME RESIDENCE, COMPLETE THE FOLLOWING				
FULL NAME OF: <input type="checkbox"/> OWNER <input type="checkbox"/> LANDLORD <input type="checkbox"/> MANAGER		LAST	FIRST	MI
PERMANENT MAILING ADDRESS		CITY	STATE	ZIP
RESIDENCE PHONE		BUSINESS PHONE		

**Applicable fees per Monterey County Fee Schedule – subject to annual review**

\* Billing period begins from the 1st False Alarm Activation and ends 60 days from that date.

**PERMIT FEES**

New Permit Registration Fee	\$50.00
Annual Renewal	\$30.00
Late Permit Fee	\$100.00

*Late permit fees are in addition to the annual due if not paid by the due date*

**FALSE ALARM ASSESSMENTS**

*1 <sup>ST</sup> False Alarm	\$50.00 per billing period
2 <sup>ND</sup> False Alarm	\$100.00 per billing period
3 <sup>RD</sup> False Alarm	\$200.00 per billing period
4 <sup>TH</sup> False Alarm	\$300.00 per billing period
5 <sup>TH</sup> False Alarm	\$400.00 per billing period

**ADDITIONAL FEES**

1 <sup>ST</sup> False Alarm w/o Permit	\$150.00 to \$300.00
Multiple Activation	\$150.00 each 24-hour period
Panic/Duress Alarm Violations	\$200.00 each event

The undersigned acknowledges that the Sheriff's Office reserves the right to disconnect, order disconnection, or terminate normal response to the alarm device when, in the opinion of appropriate authority in the Sheriff's Office, continued cooperation of the alarm device would constitute a detriment to the public health, safety and welfare. The undersigned is responsible for any changes relating to disconnection or termination of that alarm device by the Sheriff's Office.

It is expressly understood by the undersigned that any violation of the County of Monterey Alarm Ordinance may result in a suspension or revocation of this permit and/or assessment as prescribed in the ordinance itself. The Monterey County ordinances as they apply to alarms are available on the County's website at [www.co.monterey.ca.us](http://www.co.monterey.ca.us).

I have read, understood, and agree to the provisions of this alarm permit application.

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date

OWNER   
  MANAGER   
  RESIDENT