



Township of North Huntingdon Police Department

11279 Center Highway
North Huntingdon, Pa 15642

Robert Rizzo
Chief of Police

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ALARM PERMIT APPLICATION

It shall be unlawful for a property owner, lessee of property, or a person otherwise occupying a premises within the Township of North Huntingdon to put in an alarm device into operation on (his) premises without first obtaining an alarm device permit from the Police Department. It shall be unlawful for a property owner, lessee of property or a person otherwise occupying a premise outside of the Township of North Huntingdon to put an alarm device which terminates at the Police Department into operation on (his) premises without first obtaining an alarm device permit from the Police Department.

Name of Applicant: _____ **Home Phone:** _____

Home Address: _____ **City:** _____ **Zip Code:** _____

Business Name: _____ **Business Phone #** _____
(If applicable)

Alarm Device: _____
(MAKE) _____ (MODEL) _____ (TYPE) _____

Name, Address and Phone number of person or business servicing alarm device or from whom alarm device has been leased or rented from. (If applicable)

(NAME) _____ (PHONE #) _____

(ADDRESS) _____

Location at which alarm device will be installed and operated:

(ADDRESS) _____

Names, Addresses and phone numbers of at least two (2) individuals who have keys to the premises where alarm device is located and are authorized to enter premises at any time to disable alarm and who do not reside at the location of the alarm device:

(NAME) _____ (ADDRESS) _____ (PHONE NUMBER) _____

(NAME) _____ (ADDRESS) _____ (PHONE NUMBER) _____

(NAME) _____ (ADDRESS) _____ (PHONE NUMBER) _____

REFER TO REVERSE SIDE TO COMPLETE APPLICATION:

ALARM PERMIT APPLICATION CONTINUED:

I (we) the undersigned applicant(s) for an alarm device permit, intending to be legally bound hereby, state that neither I (we), nor anyone claiming be, through or under me (us), shall make any claim against the Township of North Huntingdon for any damage caused to the premises at which the alarm devise, which is the subject of this application, is or will be located, if such damage is caused by a forced entry to said premises by employees of the Township of North Huntingdon in order to answer an alarm from said alarm device at a time when said premises are or appear to be unattended or when, at the discretion of said employee, circumstances appear to warrant a forced entry.

Further, I (we) hereby agree that, periodically and upon five (5) days written notice, representatives of the Police Department of the Township of North Huntingdon shall be allowed to enter my (our) premises between the hours of 10:00 a.m. and 5:00 p.m. on weekdays for the purpose of inspecting my (our) alarm device installation in order to determine whether or not it is in accordance with the operational standards set forth in section 55-3 of the Township of North Huntingdon Ordinance number 617.

Signature of Applicant: _____ (DATE)

Signature of Applicant: _____ (DATE)

Please check off which applies to your alarm device:

- A. Direct hookup to police department: _____
- B. Telephone dialer direct to police department: _____ APPROVAL # _____
- 3. Alarm to central monitoring station: _____

A COPY OF THE OPERATIONAL STANDARDS ARE ATTACHED TO THE APPLICATION

APPLICATION APPROVED _____ **DENIED** _____

CHIEF OF POLICE OR DESIGNEE _____ DATE _____

If denied, reason for denial: _____

\$25.00 FEE REQUIRED ACCOMPANYING THIS APPLICATION _____ DATE RECEIVED _____

Signature of person receiving fee: _____