



GLEN ROCK POLICE DEPARTMENT

1 Harding Plaza, Glen Rock NJ 07452

Alarm Registration Application

INCOMPLETE or ILLEGIBLE FORMS WILL BE RETURNED

Alarm(s) Type (check all that applies):

- Burglar / Panic / Hold-Up / Duress
- Fire

Please Indicate:

- Business
- Residential

Full Name of Property Owner/Occupant: _____

If Registration is for a Business

Business Name: _____

Address of Glen Rock

Alarmed Premises: _____ Suite or Unit # _____

Billing Address (if different): _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____ Office Phone: _____

_____ **Check here if the following information remains the same from previous year.**

EMERGENCY CALL LIST (List persons to be called in case of alarm activation or emergency)

Contact Names	Address	Home Phone	Cell Phone
1			
2			
3			

ALARM INSTALLATION DETAILS / SIGNATURE / FEE

Alarm Monitoring Company: _____ Phone _____

PLEASE READ THE FOLLOWING & SIGN:

This is to certify that as the applying principal, my immediate family, tenants or employees who have access to the protected premises have been given training which includes procedures and practices to follow in the event that the alarm system is accidentally activated. I also acknowledge that the installation company left me a set of written instructions for the alarm system, including written guidelines on how to avoid false alarms. In accordance with Glen Rock Ord. 63-2a, as amended, all alarms must be registered by the 30th of January each year and after the 3rd false alarm a fine may be levied. **NOTE:** The police response may be influenced by factors including, but not limited to, the availability of officers, priority calls, traffic conditions, emergency conditions and staffing levels.

Signature: (Owner) _____ Date: _____

Forms are to be returned to:

Glen Rock Police Records Bureau, 1 Harding Plaza, Glen Rock, NJ 07452
Checks ONLY, made Payable to the Borough of Glen Rock for \$25.00.

For additional alarm ordinance, registration & fine information:

www.glenrockpolice.com

<u>For Office Use Only</u>	
Date Recv'd:	_____
Date Entered CAD:	_____ Clerk _____
Check #:	_____ Receipt #: _____