

Please check one: <input type="checkbox"/> New Application <input type="checkbox"/> Renewal <input type="checkbox"/> Change of Information
Please check one: <input type="checkbox"/> Residential <input type="checkbox"/> Commercial

*Instructions: Answer ALL questions completely as any errors, misstatement of facts, or omissions of facts shall be cause for refusal of permit or for immediate revocation of Alarm Permit.*

**PREMISE INFORMATION**

ALARMED ADDRESS: \_\_\_\_\_

RESIDENT OR BUSINESS NAME: \_\_\_\_\_

PHONE NUMBER OF ALARMED PREMISE: (\_\_\_\_\_) \_\_\_\_\_

**APPLICANT INFORMATION:** \*Applicant must be the owner/lessee/manager of the premise\*

NAME OF APPLICANT(S): \_\_\_\_\_

MAILING ADDRESS (if different from above): \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

APPLICANT(S) DAYTIME PHONE NUMBER (\_\_\_\_\_) \_\_\_\_\_ NIGHT PHONE NUMBER (\_\_\_\_\_) \_\_\_\_\_ CELL/ALT NUMBER: (\_\_\_\_\_) \_\_\_\_\_.

**INFORMATION FOR THREE LOCAL RESPONDERS WITH ACCESS/KEY, OTHER THAN APPLICANT(S), AS REQUIRED BY LOCAL LAW**

- 1) Name: \_\_\_\_\_ Phone # (    ) \_\_\_\_\_
- 2) Name: \_\_\_\_\_ Phone # (    ) \_\_\_\_\_
- 3) Name: \_\_\_\_\_ Phone # (    ) \_\_\_\_\_

This is an application to Install/Maintain the following system(s), check all that apply:  Burglar     Hold up  
 Panic/Medical     Fire Alarm     Fire Sprinkler.     Burg/Fire/Medical/CO     Other \_\_\_\_\_

Which of the following features is your system equipped with, check all that apply;  Intrusion Detector  
 Panic Button     Outside audible, to auto reset in 15 minutes or less     Other,specify: \_\_\_\_\_  
 smoke or fire detectors, exempt if designed to alert ONLY the occupants of the premise (Local alarm only)

This system will be:  Connected to the following Central Monitoring Alarm Company: \_\_\_\_\_  
\_\_\_\_\_ Phone Number for 24-hour contact:(    ) \_\_\_\_\_

Not connected to a Central Monitoring Company



# Town of Colonie Alarm Permit

Permit # \_\_\_\_\_

**Fee:** \$25.00; Permit valid for two years from approved registration/renewal date (medical alarms are exempt)

Please check if Senior Residential permit exception requested (age 62 or older-please include ID):

**Return Form and Fee to:** Office of the Colonie Town Clerk, 534 New Loudon Road, Latham, NY 12110

I certify that the information provided is true. In consideration for the issuance of a permit hereunder, applicant hereby agrees to hold the Town of Colonie harmless from any liability arising out of the operation of the alarm system described herein, or the operation of any equipment to which the system is connected, either from acts of commission or omission. The applicant also authorizes the Colonie Police Department to effect entry into the described premises by whatever means necessary upon receipt of an alarm activation, and when it appears that such entry is necessary to protect any person(s).

Date: \_\_\_\_\_

\_\_\_\_\_  
Applicants' signature

NOTICE: Pursuant to the State of New York PL §210.45, it is a crime punishable as a Class "A" misdemeanor to knowingly make a false statement herein.

## QUICK FACTS

- Alarm systems must be registered within 45 calendar days of installation.
- Alarm users are required to notify the Town of Colonie of any changes to the information provided in their application within 30 days of such change (i.e. new manager, contact persons or change in phone number(s)).
- Persons may be subject to fines, arrest or other sanctions for failing to submit an application.
- Alarms that can only be heard inside your home and are not transmitted to an alarm company do not require a permit.
- Medical Alert System Alarms-alarms that when activated are specifically intended to result in a response from an emergency medical services agency are exempt from registration fees.
- The Alarm Permit must list the name and telephone number of three LOCAL people who an emergency agency may contact at any time and who are authorized by the person who owns or leases the premise to enter the premises and, if the person determines such premises are safe and secure, deactivate or silence the alarm.
- Upon written request addressed to the Town Clerk, the permit fee shall be waived for any person over the age of 62, who occupies premises upon which an alarm system is installed or operated, provided that the intended alarm system shall be residential and not used in connection with any commercial of business purpose.
- The permit holder for a premises to which an emergency agency responds as a result of a Nuisance Alarm arising from such premises shall pay a fee for each emergency agency response in each calendar year as set for in the fee schedule adopted by the Town Board pursuant to Chapter 46 of the Code of the Town of Colonie. Entitled "Alarm Systems".

**FOR OFFICIAL USE ONLY: (7/2022)**

Entered: \_\_\_\_\_

BAS \_\_\_\_\_

CAD \_\_\_\_\_

Date Received \_\_\_\_\_

Payment Method \_\_\_\_\_

Expiration Date \_\_\_\_\_

FS \_\_\_\_\_