

ALARM DEVICE PERMIT APPLICATION

Office Use Only
Permit Number _____

Name: _____ Business Name: _____
 Home Address: _____ Business Address: _____
 Telephone Number: _____ Telephone Number: _____
 Fax Number: _____ Fax Number: _____
 Location at which the Alarm Device will be installed and operated: _____

Persons with keys who are authorized to enter premises where alarm is located but do not reside at the location of the Alarm Device: (at least two)

Name: _____ Name: _____
 Address: _____ Address: _____
 Telephone Number: _____ Telephone Number: _____

Complete description of Alarm Device (include a copy of the operating instructions and all relevant facts concerning the design and layout of the premises to be protected by the Alarm Device): _____

If Alarm Device is leased, rented or serviced pursuant to a service agreement by a person other than Applicant, supply the following:

Leased or Rented from or Serviced by:

Name: _____ Address: _____
 Telephone Number: _____

The following statement must be signed by the Applicant:

"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 by, through or under me (us), shall make any claim against the Borough or against a public service agency for any damage caused to the premises at which the alarm device, which is the subject of the application, is or will be located, if such damage is caused by a forced entry to said premises by employees, members or representatives of the Borough or a public safety agency in order to answer an alarm from said alarm device at a time when said premises is or appears to be unattended or when in the discretion of said employees, members or representatives, circumstances appear to warrant a forced entry.

Further, I(we) hereby agree that, periodically and upon five (5) days' written notice, representatives of the Borough shall be allowed to enter my(our) premises at reasonable times 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 1 of Ordinance No. 816 of the Borough of West Reading (Section 703 of Chapter XIII of the Borough of West Reading Code of Ordinances regarding Alarm Devices)."

Signed: _____ Signed: _____
 (Title) (Title)

Print Name: _____ Print Name: _____
 Date: _____ Date: _____

OFFICE USE ONLY

REMARKS

| | DATE | BY | |
|---------------|------|----|---------------|
| Received | | | Fee Paid |
| Reviewed | | | Decision |
| Permit Issued | | | Permit Number |
| Inspected | | | Result |