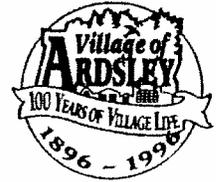


POLICE DEPARTMENT

VILLAGE OF ARDSLEY

INCORPORATED 1896



EMIL J. CALIFANO

CHIEF of POLICE
TEL. 914-693-1700
FAX: 914-693-8298

Municipal Building
507 Ashford Ave
Ardsley NY 10502

WESTCHESTER COUNTY

Circle One:
Application / Renewal

Alarm Registration Form

Property Owner: _____
Street Address: _____
Telephone Number (At Alarmed Address): () _____ - _____
Resident or Company Name: _____
Address: _____
Telephone Number: () _____ - _____

Year of: 20__

Alarm / Premise # _____ (PD use only)

Alarm Permit Fee: \$25.00 Please make check payable to "Village of Ardsley"

Type of alarm: Burglar ___ Fire ___ Medic Alert ___ Panic ___

Alarm transmitted by: Central Station ___ Telephone Dialer ___ Audible / Visual ___

Alarm Company Information

Name: _____
Address: _____
Telephone Number: () _____ - _____
Westchester County License Number: _____

List person for us to contact who have the means (key, alarm info / code) and authority to enter premise for the purpose of checking, securing, and resetting alarm system.

*******Minimum of Two (2) contact persons are required by law*******

| Name | Address | Telephone Number |
|--|---------|------------------|
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |
| 6. () POLICE DEPARTMENT HAS KEY AND ALARM INFO. Please provide on the back of this form | | |

Authorization / Release

The Ardsley Police Department has the authorization (by law) to forcibly enter a premise when a continuous audible alarm is sounding in excess of fifteen (15) minutes or if alarm is transmitted as: Holdup, Panic, Medic Alert, or Fire / Smoke

Signature: _____ Date: ___ / ___ / ___

******Permit expires on December 31st of each calendar year and MUST be renewed annually******