Dear Alarm Applicant and/or User:

The Gilbert Town Council adopted an Alarm Ordinance, Chapter 11, Section 5, of the Town Code, relating to and regulating alarms, that became effective February 2, 1993. There are some items that you need to be aware of as highlighted below:

Alarm definition: Alarm means any mechanical or electrical device that is used to detect unauthorized entry into buildings or onto premises, or for alerting others of an emergency, or of the commission of an unlawful act within the buildings or on the premises. Car alarms and alarms utilized solely for fire reporting or medical emergencies do not require a permit

1. Permits for alarms are required and renew annually; there is no charge if renewed within thirty (30) days after expiration. Permits not renewed during this 30 day period incur a $25 administrative fee. Permit renewals are sent by mail at the end of your permit year.

2. Alarm users must obtain an alarm permit within ten (10) days after the alarm becomes operational. From the date of installation, there is a 30 day grace period for false alarms.

3. There is a $10 one-time filing fee for alarm permits.

4. A permit issued by the Town will be physically on the premises using the alarm and will be available for inspection by the Alarm Coordinator.

5. The alarm user or permittee will notify the Alarm Coordinator of any changes in the information contained in the application or permit. All information contained in the application is confidential. Permittee will notify Alarm Coordinator of discontinuation of alarm within ten (10) days of effective change.

6. All audible alarms will be equipped with an automatic sound emission cutoff feature, that will stop the emission of sound within fifteen (15) minutes after an activated alarm.

7. When five (5) or more false alarms occur within one permit year, upon request by the Alarm Coordinator, the alarm user or owner will submit a letter specifying what corrective action was taken to prevent future false alarms.

8. No person shall use or caused to be used any automatic dialing device that automatically selects a public safety or emergency services telephone line of the town and then reproduce any prerecorded message or signal or otherwise maintains an open line without direct person to person communication; prevents termination of a call by public safety or emergency services.

9. Alarm permit fee is waived for residents over 65 years of age. Date of birth must be provided.

10. The fifth (5th) and subsequent false alarms during a Permit year are considered excessive and subject to a minimal penalty fee(s) as follows: (Not to exceed $2,500.)

Number of False Alarms	Amount of Fine
0-4	No Fine
5-9	$50
10-14	$100
15 and up	$200

Please complete the alarm application on the reverse side and return to the Alarm Coordinator. A copy of your alarm permit including permit number and date of issue will be returned by mail. Refer to the permit number on correspondence or phone calls. **Please contact the Gilbert Police Alarm Coordinator, 503-6649, it you have any questions.**

Applicant Signature: _____ Date: _____

Printed Name: _____ _____
(If over 65 - date of birth)

Please note any specials needs/concerns m your home/business: deaf/blind/handicapped/elderly/medical alert guard dogs/domestic or employee situations/etc.

_____

_____

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<tr><td colspan="2">TOWN OF GILBERT</td><td>OFFICE USE ONLY</td></tr>
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TOWN OF GILBERT

ALARM USER PERMIT
(Please print or type)

Please include $10 filing fee
Check payable to Town of Gilbert
(See #9 on back of application for fee waiver.)

OFFICE USE ONLY

Received: _____

Permit Number: _____

Data Entry: _____

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1. RESIDENTIAL (for home alarms)

_____ *Homeowner's Name(s)*

_____ *Mailing Address*
                                    (Street)

_____
(City)   .   (State)   (zip)

Alarm Address: _____
(If different from above)   (Street)   (Gilbert/Higley)   (AZ)

Owner #1 Telephone Number: (home) _____   (work) _____

Owner #2 Telephone Number: (home) _____ _____   (work) _____

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2. BUSINESS (for businesses and model homes with alarms)

Owner's Name: _____   Telephone No.: (_____) _____

Address: _____
        (Street)   (City)   (State)   (zip)

_____ *Business Name*   (_____) _____
                                                        (Telephone No)

_____ *Mailing Address*
                                    (Street)

_____
(City)   (State)   (zip)

Alarm Address: _____
(If different from above)   (Street)   (Gilbert/Higley)   (AZ)

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3. ALARM INFORMATION

Type: Burglar ☐   Robbery ☐   Panic ☐   Fire ☐   *Date of Installation:* _____

Alarm Service Name: _____   *Address:* _____
                                                (Street)   (City)   (State)   *(zip)*
Telephone: (_____) _____

Person to contact during alarm activation (one person other than owner is required):

1) _____ Day Phone: _____ Night Phone: _____

2) _____ Day Phone: _____ Night Phone: _____

3) _____ Day Phone: _____ Night Phone: _____