



OFFICE OF THE CITY CLERK

Rome City Hall, 198 N. Washington Street
Rome, New York 13440-5815
Tel.: (315) 339-7659 Fax: (315) 838-1160
www.romenewyork.com

ALARM PERMIT APPLICATION

PLEASE PRINT OR TYPE. Answer all questions completely.

If a question is not pertinent, write N/A in the accompanying space. Do not leave any question unanswered. *Incomplete or unanswered questions shall result in a denial of the application.*

***** PLEASE INCLUDE A PHOTOCOPY OF YOUR DRIVER LICENSE *****

This application for an Alarm user permit is made pursuant to the provisions of the Rome Code of Ordinances, Chapter 22, Emergency Services. <http://www.romenewyork.com/>

Date: _____, 20____

APPLICANT INFORMATION

Name of Applicant: _____

Are You the Property Owner? Yes _____ No _____

IF NO – Has the property owner been notified of the alarm system? Yes _____ No _____

RESIDENTIAL INFORMATION (Property where alarm system is installed)

Address: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Email Address: _____

BUSINESS/ORGANIZATION INFORMATION (IF APPLICABLE)

Name of Business: _____

Address: _____

Hours of Operation: _____

Manager: _____ Business Phone: _____

Cell Phone: _____ Email: _____

PROPERTY OWNER:

Name: _____

Address: _____

City: _____

Phone: _____

SYSTEM INSTALLED BY:

Company: _____
Address: _____
NYS Lic. No: _____
Contact: _____

SECURITY SYSTEM

Is there a security system? Yes_____ No_____
Local alarm or monitored? Local_____ Monitored_____
If monitored, phone number of monitoring company: _____

FIRE ALARM

Is there a fire alarm system? _____
Local alarm or monitored? _____
Phone number of monitoring company: _____
Is there a Knox Box on site? Yes_____ No_____

Please note that if you have a fire alarm system, the City of Rome Fire Department has a Knox Entry System. If you would like the Fire Department to have a key to your building, please call 315-339-7784 for further information.

HAZARDOUS MATERIAL INFORMATION

1. Are hazardous materials stored or maintained at this location? Yes_____ No_____
2. Are material safety data sheets (MSDS) on file? Yes_____ No_____
3. If Yes, Where?

EMERGENCY CONTACT INFORMATION

Name: _____
Title: _____
Address: _____
Home Phone: _____ Work Phone: _____ Cell Phone: _____

KEY HOLDER

Being a key holder for a person that has an alarmed building is a responsibility that should not be taken lightly. There have been some instances where responding key holders have needlessly created potentially dangerous situations. The following is a list of instructions (do's and don'ts) for key holders responding to alarms.

- **Don't** rush to get there – **do** arrive safely.
- **Don't** park in the driveway – **do** park on the street in front of the next-door neighbor's house.
- **Do** call 911 and tell the dispatcher that you have arrived, and await further instructions.
- **Don't** enter the residence until asked to do so by the police.
- **Don't** assume that it is just a routine false alarm. Trained police officers treat it as a real threat, and you should as well.
- **Do** follow the officers' directions – for your own safety, and the safety of anyone else involved.
- **Do** remain in your car until the building has been cleared by the responding officers, and it is determined to be safe to enter.
- **Don't** assume that the responding officers know you and your personal relationship with the building's owner.

Following these simple instructions can help prevent a potentially dangerous situation from needlessly becoming even more dangerous.

Please be sure to choose your key holders carefully. Be sure that you are confident that they can abide by and carry out the above listed guidelines.

Key Holder: _____
 Address: _____
 Home Phone: _____ Work Phone: _____ Cell Phone: _____

Key Holder: _____
 Address: _____
 Home Phone: _____ Work Phone: _____ Cell Phone: _____

Signature of Applicant

Sworn to before me this _____ day
of _____ 20_____.

Notary Public or Commissioner of Deeds

INTERNAL USE ONLY

ROME POLICE DEPARTMENT

Approved Disapproved

Signature _____ Title _____ Date _____

ROME FIRE DEPARTMENT

Approved Disapproved

Signature _____ Title _____ Date _____

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APPLICATION FEE & LICENSING INFORMATION

I hereby fix the license fee for the above license at the sum of twenty-five dollars (\$25.00) for the registration of the corresponding alarm system.

Date Fee Paid: _____ Fee Exempt: _____

Date Issued: _____ License No.: _____

City Clerk Signature

Date