

Application for Business Alarm Permit

D N.			Deter	
Business Name:			Date:	
Address:				
Website:			Phone:	
	Description o	f Business (i.e. retail, war	ehouse, factory, etc	.)
Doog the Puginess own	the Puilding)	If Not, B	uilding Owner Info	rmation
Does the Business own	i the bunding:	Name	e	Phone
□Yes □	No			
		Emergency Contact Infor	mation:	
Name:		Home Phone:	Cell Phone:	Work Phone:
		Alarm Information	:	
Alarm Compan	y Name:	Phone Number:	Reset Loca	tion in Building:

Your permit will be kept on file with the New Albany Police Department. This permit is not transferrable. A copy of the City Alarm Ordinance (§705) is available on request or on line at <u>www.newalbanyohio.org</u>. The City's Alarm Ordinance is intended, in part, to prevent and/or correct repeated false alarms caused by faulty equipment, carelessness etc.. The ordinance allows for three (3) false alarms in one (1) calendar year with no fine. A fine is assessed by the City of New Albany for the fourth (4) and subsequent alarms during a calendar year. Additionally, the information provided will be used by the police and fire departments to contact owners/key holders in the event of an emergency at your business. If you have questions or need further information please contact the New Albany Police Department at 614-855-1234.

Please return via email to reports@newalbanypolice.org or U.S. Mail to:

New Albany Police Department P.O. Box 271 New Albany, Ohio 43054

by: Date: Approved: Yes No
