

**Bangor Police Department
Alarm Permit Application Form**

The information provided on this form is considered intelligence information and can be released only to law enforcement officers as specified in M.R.S.A. Title 16, Section 611-622.

Name _____ Alarm Company _____
 Address _____ Address _____
 Address _____ Address _____
 Telephone _____ Telephone _____

Persons to be contacted in case of emergency (please list at least two, in order of preference)

Name _____ Telephone #1 _____
 Address _____ Telephone #2 _____

Name _____ Telephone #1 _____
 Address _____ Telephone #2 _____

Name _____ Telephone #1 _____
 Address _____ Telephone #2 _____

Name _____ Telephone #1 _____
 Address _____ Telephone #2 _____

Type of Alarm System (This information is not mandatory but can be helpful to the officers responding):

Burglary _____	Contacts _____	Infrared _____
Perimeter _____	Photoelectric _____	Ultrasonic _____
Microwave _____	Panic _____	
Robbery _____	Floor Mats _____	Other _____

Alarm termination point: Alarm Company _____ Local Audible _____ (In-House Security)

ALARM RESPONSE AGREEMENT:

I understand that I will be billed for police responses to alarms during the calendar year at the rate per occurrence set out in Chapter 58 of the Code of the City of Bangor. I agree to pay said fee(s) within thirty (30) days of the billing date of any invoice containing said fee(s). I also authorize the Bangor Police Department to use any reasonable means necessary to silence an audible alarm that is activated for longer than one hour of continuous operation.

Signature of Applicant: _____ Date: _____