

MENOMONEE FALLS POLICE DEPARTMENT
Alarm Permit Application

All Information Will Be Kept Confidential

Check One:

- ☐ Business
☐ Residence

Check One:

- ☐ New
☐ Renewal

Check One or Both:

- ☐ Fire Alarm
☐ Police Alarm

Please print or type all information.

Name of Business or Homeowner: _____

Address: _____ Phone: _____

Mailing Address (if different from above): _____

Name and e-mail of point of contact: _____

Type of Business (if applicable): _____

Manager Name: _____ Hours of Operation: _____

Keyholder Information

**Please list at least three (3) persons who can respond with keys *within 30 minutes* to inspect the building interior with police/fire personnel.
(Homeowner cell phone or business phone will be considered in lieu of a keyholder.)**

	<u>Name</u>	<u>Home Phone</u>	<u>Cell Phone/Pager</u>
1.	_____ ()	_____ ()	_____
2.	_____ ()	_____ ()	_____
3.	_____ ()	_____ ()	_____
4.	_____ ()	_____ ()	_____

Alarm Company Information

Name of Alarm Company: _____

Alarm Company Phone Number: _____

- continued on reverse -

Alarm Signal: ☐ Audible, resets in _____ minutes ☐ Silent
 (Village ordinance requires a reset within 15 minutes)
☐ Visual (explain):_____

Event Detected: ☐ Intrusion ☐ Hold-Up ☐ Fire/Smoke
 ☐ Temperature Change ☐ Other (specify):_____

Type of Alarm: ☐ Perimeter Entry ☐ Interior Motion ☐ Container (safe)
 ☐ Interior Room Entry ☐ Other (specify):_____

- Is there a security guard on the premises after hours? _____
If yes, explain:_____
- Are there any pets/animals on premise?_____Type/Breed_____
- Are there any hazardous or explosive materials kept on the premises?_____
- If yes, explain:_____
- Do you have an outside cleaning/janitorial contractor?_____
- If yes, name of cleaning company or personnel:_____

- | |
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| |
|--|

Date:_____

Date: _____