



Administration
 (732) 462-1233
 FAX (732) 577-8308

Freehold Borough Police Department

36 Jackson Street
 Freehold, New Jersey 07728



Chris D. Colaner
 Chief of Police

BOROUGH OF FREEHOLD REGISTRATION FOR ALARM SYSTEM **\$50.00 ANNUAL REGISTRATION FEE**

Date: _____ Permit # _____ Type of Alarm: Burglar ___ Fire ___ Other ___

Applicant's Name _____ Telephone # _____

Applicants Address _____ Location of Alarm _____ If different

Alarm Monitored by _____ Phone # _____

Name / Address of Person Responsible for Maintenance _____

Contact Number of Person Responsible for Maintenance _____

In case of an emergency, please list in order of priority, persons to be contacted and are authorized to gain entry into the protected premises.

1. Contact Name/Address/Phone # _____

2. Contact Name/Address/Phone # _____

By signing this registration document, I agree to abide by all terms and conditions set forth in the Alarm System Ordinance as described in Title 8 Chapter 8.04 of the Freehold Borough revised General Ordinances.

False Alarm Penalties (Ordinance 8.04.060)

1 st False Alarm w/in 12 month period -	Warning
2 nd False Alarm w/in 12 month period-	\$50.00
3 rd and subsequent False Alarm w/in 12 month period-	\$100.00

Failure to submit a completed application will result in the denial of a permit.

Applicant Name _____ Applicant Signature _____

Date: _____

Amount/Fee Paid _____ Approved _____ Denied _____

Authorized by _____