# RESIDENTIAL APPLICATION FOR PERMIT TO OPERATE ALARM SYSTEM

**New Permit** 

**Update Permit** 

N.B.M.C. Section 5.49.020 requires a permit to operate an alarm system within the city limits of Newport Beach

The application fee is \$\_\_\_\_\_\_. You will be billed this amount after the application is processed.

Please return this completed form to:

Newport Beach Police Department, Attn.: Alarm Office 870 Santa Barbara Dr., P.O. Box 7000, Newport Beach, CA 92660

|  | Account #:  | CS #:              | MID#:  | RD:         | Fee Rec'd/Chk #:   | Processed    | d by:                            | Date:                  |
|--|---|--------------------|--|-------------|--|--------------|----------------------------------|------------------------|
|  |   |                    |  |             |  |              |                                  |                        |
| Alarmed Loca   | ation Information:  |                    |  |             |  | •            | •                                |                        |
|  |   |                    |  |             | <del></del>  |              |                                  |                        |
| ddress   |   |                    |  |             | Phone Number   |              |                                  |                        |
|  | t Residents (Last, F  | First) Weapon(s)   | Dog(s)   |             | Description:   |              |                                  |                        |
| Billing Inform   | nation:   |                    |  |             |  |              |                                  |                        |
|  |   |                    |  |             |  |              |                                  |                        |
| Name: (Last, F   | lame: (Last, First Middle)  |                    |  |             |  | Number       |                                  |                        |
| Address: (Stre   | eet Address, Suite/A  | Apt. #. Citv. Stat | e. ZIP Code)   |             |  |              |                                  |                        |
|  | Individual for Ala  |                    |  |             |  |              |                                  |                        |
|  |   |                    |  |             |  |              |                                  |                        |
| Applicant Nam  | ne (Last, First, Midd   | dle)               |  |             | Drivers L  | icense Numbe | er                               | State                  |
|  |   |                    |  |             | _  |              |                                  |                        |
| Address (Stree   | et address, Suite/A   | .pt #, City, State | , ZIP Code)  |             |  |              |                                  |                        |
| Home Phone   |   |                    | Business Pho   |             |  | Cell Phone   |                                  |                        |
| rionic i nonc  |   |                    | Dusiness i noi   | 10          |  |              |                                  |                        |
| E-mail Addres  | S   |                    |  |             | _  |              |                                  |                        |
|  | m Information (Ple<br>Monitored by Ala  |                    | IE):<br>Name of the Ala  | arm Comp    | any  |              |                                  |                        |
|  |   | <del> </del>       |  |             |  |              |                                  |                        |
| Phon   | ie Number   |                    | Address  |             |  |              |                                  |                        |
|  |   | bbery (Panic, S    |  | ry (Doors,  | Windows, Motion)   | Fire (Smoke  | e, Heat)                         | Medica                 |
| Pleas<br>System is   |   |                    | ilent) Burgla  |             | •  | Fire (Smoke  | e, Heat)                         | Medica                 |
| Pleas<br>System is<br>(Not an Ala<br>System is   | se check: Ro  Monitored by Poliarm Company)  Audible Only - No  | ice Departmen      | ilent) Burgla t Please provide the company.  | ne Cancel   | Code/Password:   | Fire (Smoke  | e, Heat)                         | Medica                 |
| Pleas<br>System is<br>(Not an Ala<br>System is   | se check: Ro  Monitored by Poliarm Company)  Audible Only - No  | ice Departmen      | ilent) Burgla t Please provide the company.  | ne Cancel   | •  | Fire (Smoke  | e, Heat)                         | Medica                 |
| Pleas<br>System is<br>(Not an Ala<br>System is<br>Emergency T  | Monitored by Poliarm Company)  Audible Only - Notellephone Number   | ice Departmen      | ilent) Burgla  t Please provide the property of the provide the pr | ne Cancel   | Code/Password:   |              |                                  |                        |
| System is (Not an Ala System is Emergency T  | Monitored by Poliarm Company)  Audible Only - Notelephone Number  | ice Departmen      | ilent) Burgla t Please provide the company.  | ne Cancel   | respond to location)  Bus. Phone   |              | Cell Ph                          | one                    |
| System is (Not an Ala System is Emergency T  | Monitored by Poliarm Company)  Audible Only - Notellephone Number   | ice Departmen      | ilent) Burgla  t Please provide the property of the provide the pr | ne Cancel   | Code/Password:   |              |                                  |                        |
| System is (Not an Ala System is Emergency T  Name (Last, F  Relationship to                              | Monitored by Poliarm Company)  Audible Only - Notellephone Number  First, Middle)  Department Holder:                                     | ice Departmen      | ilent) Burgla  t Please provide the property of the property o | ole able to | respond to location)  Bus. Phone  Has Key & Cod                          | e to Alarm:  | Cell Ph<br>Yes                   | one<br>No              |
| System is (Not an Ala System is Emergency T  Name (Last, F  Relationship to                              | Monitored by Poliarm Company)  Audible Only - Notelephone Number  First, Middle)  Department Holder:                                      | ice Departmen      | ilent) Burgla  t Please provide the property of the provide the pr | ole able to | respond to location)  Bus. Phone  Has Key & Cod  Bus. Phone              | e to Alarm:  | Cell Ph<br>Yes<br>Cell Ph        | one<br>No<br>one       |
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| System is (Not an Ala System is Emergency T  Name (Last, F Relationship to                               | Monitored by Poliarm Company)  Audible Only - Note lephone Number  First, Middle)  Department Holder:  First, Middle)  Department Holder: | ice Departmen      | ilent) Burgla  t Please provide the property of the property o | ole able to | respond to location)  Bus. Phone  Has Key & Cod  Bus. Phone              | e to Alarm:  | Cell Ph<br>Yes<br>Cell Ph        | one<br>No<br>one<br>No |
| System is (Not an Ala System is Emergency T  Name (Last, F Relationship to Name (Last, F Relationship to | Monitored by Poliarm Company)  Audible Only - Note lephone Number  First, Middle)  Department Holder:  First, Middle)  Department Holder: | ice Departmen      | ilent) Burgla  t Please provide the property of the provide the pr | ole able to | respond to location)  Bus. Phone Has Key & Cod  Bus. Phone Has Key & Cod | e to Alarm:  | Cell Ph<br>Yes<br>Cell Ph<br>Yes | one<br>No<br>one<br>No |

(Date)

(Applicant's Signature)

NBPD Form 15.53 (Rev. 10/21)

### **Alarm System Requirements**

The alarm company central station must give the alarm permit number to the Police/Fire dispatcher at the time an alarm is reported. Ascertain that your alarm company has forwarded your assigned permit number to the central station.

Exterior Audible devices may sound for a maximum of fifteen (15) minutes at a residential location and thirty (30) minutes at a commercial location before automatically resetting.

A battery backup power supply must maintain the alarm system for a minimum of two (2) hours in case of a power failure.

Automatic dialing devices used for notification of an alarm activation shall be prohibited.

The alarm permit is nontransferable.

The Police Department may inspect the system after issuance of a permit to determine whether it is being used in conformity with the terms of the permit.

The Police Department Alarm Office must be notified of any alarm service termination.

### **Renewal Fees**

| Newport Beach Municipal Code Section | 5.49.045 requires an annual renewal fee for a              |
|--------------------------------------|--|
| commercial alarm permit of \$        | and a triennial renewal fee for a residential alarm permit |
| of \$ .                              | ·  |

### **False Alarms**

By City Ordinance definition, a false alarm is "...the activation of an alarm system through mechanical failure, accident, misoperation, malfunction, misuse, or the neglect of either the owner or lessee of the alarm system or any of his employees or agents." In the absence of any evidence of an unlawful intrusion constituting a crime or attempted crime, a conclusive presumption of a false alarm will be made.

The first and second Police false alarms within a calendar year (defined as January 1<sup>st</sup> to December 31<sup>st</sup>) are not assessed a fine.

A third Police false alarm within a calendar year is assessed a \$50 fine.

A fourth Police false alarm within a calendar year is assessed a \$100 fine.

Additional fines are assessed for each subsequent Police false alarm within a calendar year, increasing by \$25 each time. For example: a fifth Police false alarm would be \$125, a sixth would be \$150, etc.

## **Permit Revocation**

The alarm permit may be revoked upon failure to pay any false alarm fines.

The alarm permit may be revoked after the sixth false alarm within a calendar year.

Operation of an alarm system while the permit is revoked is an infraction and may result in a citation.

#### **Questions**

Please contact the Alarm Office at (949) 644-3723.