



BARNSTABLE POLICE DEPARTMENT
1200 Phinney's Lane, Hyannis, MA 02601
www.barnstablepolice.com

2023 ALARM COMPANY LICENSE APPLICATION

Name of Alarm Company: _____
(Include Corporation Name / DBA)

Address: _____
(Include City, State, Zip Code)

Phone Number: _____

Name of Monitoring Company: _____

Address: _____

Phone Number: _____

- I, the undersigned, have read the Town of Barnstable's regulations regarding alarms (available on-line @ www.barnstablepolice.com). I understand that by signing this form, I accept responsibility for the alarm regulations as set forth by the Town of Barnstable including notifications, licensing requirements and fines.
- I understand that police response to an alarm is not mandated and that any response may be influenced by factors including, but not limited to: the availability of police units, priority of calls, weather conditions, traffic conditions, emergency conditions and staffing levels.
- I understand the purpose of the regulations is to encourage alarm users and alarm companies to properly install, use, maintain and take responsibility for the operational effectiveness of alarm systems in order to improve the reliability of alarm systems and to reduce false alarms.

Please include \$25.00 licensing fee with this application made payable to the Town of Barnstable. Any incomplete or altered forms will be considered NOT licensed and will be subject to penalties according to the regulations.

Alarm Response Manager Name - printed

Alarm Response Manager Signature / date of birth

Email address: _____