



BARNSTABLE POLICE DEPARTMENT
2024 ALARM COMPANY OR ALARM MONITORING
LICENSE APPLICATION

License Fee = \$25
 Made payable to: Town of Barnstable
 Barnstable Police/Alarm Admin
 1200 Phinney's Lane
 Hyannis, MA 02601

Please check one:

- Alarm Company Both Alarm Company and Monitoring Alarm Monitoring Only (please skip to Monitoring Only section)

ALARM COMPANY

Alarm Company Name: _____

DBA (if applicable): _____

Billing Address: _____

City, State, Zip Code: _____

Alarm Company Business Phone Number: _____

Do you provide your own Monitoring? Yes No

If Yes, your Monitoring Phone Number: _____

If No, Name of Monitoring Company: _____

Monitoring Address: _____

City, State, Zip Code: _____

Monitoring Phone Number: _____

ALARM MONITORING ONLY

Monitoring Company Name: _____

DBA (if applicable): _____

Billing Address: _____

City, State, Zip Code: _____

Monitoring Phone Number: _____

- I, the undersigned, have read the Town of Barnstable's regulations regarding alarms (available on-line at 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.

Alarm Manager Name: _____ Date of Birth: _____

Alarm Manager Phone Number: _____

Email address used for renewal reminders: _____

Alarm Manager Signature

Date