

**PLEASE READ BEFORE COMPLETING THE ATTACHED APPLICATION.**

This application is for **NEW PERMIT APPLICATIONS ONLY** and is not to be used for renewals.

Mail (or bring in) your check/money order, payable to the City of Visalia along with your completed application to:

**Visalia Police Department  
Alarm Officer  
303 South Johnson Street  
Visalia, CA 93291**

Permit fees are: **\$15.00 a year**, based on the fiscal year of July 1<sup>st</sup> through June 30<sup>th</sup>. The City does not pro-rate these fees.

Please see the reverse side of this form for further information regarding the **Alarm Permit Ordinance**.

If you have any questions regarding this permit, please call the Visalia Police Department Alarm Officer at (559)713-4238.

If you want to contest an alarm response, you must do so in writing to the address listed above within five (5) working days.

**ALARM PERMITS**

Alarm permits are issued on an annual basis for a twelve-month period beginning July 1<sup>st</sup> of each year and expiring June 30<sup>th</sup> of the following year. The City does not pro-rate these fees.

All alarm systems must have a valid alarm permit renewable on July 1<sup>st</sup> of each year. Failure to renew this permit prior to July 1<sup>st</sup> of each year will constitute a violation of Visalia Municipal Code Section 8.08.

Whenever an alarm user desires to test, repair, modify, or install an alarm system, notification of such intentions shall be given to the Visalia Communications Office Dispatcher at 559-713-8116 prior to such actions.

An alarm system shall be supplied with an uninterruptible power supply in such a manner that the failure or interruption of normal utility electricity will not activate the alarm system. The power supply must be capable of at least four (4) hours of operation.

No person shall use or install any alarm, which will initiate a call and deliver a recorded message to any telephone number terminating at the Visalia Police Department.

A service charge for an emergency response will be assessed against a person or business whose alarm system generates false alarms in accordance with the following schedule:

**POLICE DEPARTMENT RESPONSE**

<b>First response occurring between July 1 &amp; June 30 .....</b>	<b>Free</b>
<b>Second response occurring between July 1 &amp; June 30 .....</b>	<b>\$35.00 ea</b>
<b>Third response occurring between July 1 &amp; June 3 .....</b>	<b>\$50.00 ea</b>
<b>Fourth response occurring between July 1 &amp; June 30 .....</b>	<b>\$65.00 ea</b>
<b>Fifth response occurring between July 1 &amp; June 30 .....</b>	<b>\$75.00 ea</b>
<b>Sixth response occurring between July 1 &amp; June 30 .....</b>	<b>\$90.00 ea</b>
<b>Seventh (&amp; any additional) response occurring between July 1 &amp; June 30 .....</b>	<b>\$100.00 ea</b>
<b>Replacement of Permit or Validation Sticker .....</b>	<b>\$4.00 ea</b>

All false alarms occurring at locations without a valid alarm system permit and after reasonable efforts of obtaining a permit application have been attained, will be issued an Administrative Citation as required by Visalia Municipal Code Section 1.13.050 with fines starting at \$100.00 for the first violation, \$200.00 for the second violation and \$500.00 for the third and any subsequent violation(s) of the year. Issuance of an Administrative Citation does not eliminate the fact that a permit must still be obtained. Copies of City of Visalia Municipal Code Chapter 8.08 and 1.13.050 are available at the Visalia Police Department 303 S. Johnson Street, Visalia CA 93291.

Permit # \_\_\_\_\_  
(office use only)

## VISALIA POLICE DEPARTMENT ALARM SYSTEM PERMIT APPLICATION

1. Alarm Location Type:      Commercial                       Residential                       School

2. Business Name: \_\_\_\_\_ Phone: \_\_\_\_\_

2.a. Contact person at business \_\_\_\_\_

**<Or>**

2. Resident Name: \_\_\_\_\_ Phone: \_\_\_\_\_

3. Complete Address/Location of Alarmed Property including zip code:

\_\_\_\_\_

4. Complete Mailing Address including zip code (if different from #3):

\_\_\_\_\_

5. Persons Who Can Provide Access to Premises in Event of Emergency:

a. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

b. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

c. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

6. Alarm Company: \_\_\_\_\_ Phone: \_\_\_\_\_

7. Signature of Applicant/Agent of Applicant:

\_\_\_\_\_ Date: \_\_\_\_\_