

**DIVISION OF TAX ABATEMENT & SPECIAL TAXES
LICENSE UNIT
920 BROAD STREET – ROOM B-17
NEWARK NJ 07102**

REGISTRATION FEE, RESIDENTIAL: \$50.00 ANNUAL FEE RESIDENTIAL: 1-4 UNITS: NO FEE
REGISTRATION FEE, BUSINESS: \$85.00 ANNUAL FEE BUSINESS: \$50.00

ANNUAL FEE RESIDENTIAL MORE THAN 4 UNITS: \$50.00

NEED TWO SEPARATE MONEY ORDERS OR CHECK

AND ROBBERY ALARM SYSTEMS ARE SUBJECT TO THE PROVISIONS AND PENALTIES OF TITLE 17, CHAPTER 3A OF THE REVISED ORDINANCE OF THE CITY OF NEWARK, NEW JERSEY AND THE REGULATIONS OF THE CHIEF OF POLICE. A COPY OF THE ORDINANCE MAY BE OBTAINED AT THE OFFICE OF THE CITY CLERK. BY SIGNING THIS QUESTIONNAIRE; I ACKNOWLEDGE THAT I HAVE READ THE ABOVE CITY ORDINANCE AND THE REGULATIONS OF THE CHIEF OF POLICE.

1. _____
 BUSINESS/RESIDENT NAME TELEPHONE NUMBER

_____ ALARM LOCATION: NO STREET CITY STATE ZIP CODE

_____ BUSINESS/RESIDENT ADDRESS IF NOT THE SAME AS ABOVE

2. _____
 LEGAL ENTITY RESPONSIBLE FOR ALARM TELEPHONE NUMBER

_____ ADDRESS OF LEGAL ENTITY: NO. STREET CITY STATE ZIP CODE

3. DATE OF INSTALLATION: _____ / _____ / _____
 MONTH DAY YEAR

4. _____
 COMPANY/INDIVIDUAL INSTALLING ALARM

5. _____
 COMPANY/INDIVIDUAL SERVICING ALARM

_____ SERVICING CO. ADDRESS: NO. STREET CITY STATE ZIP CODE

6. IS SERVING COMPANY CONTRACTED FOR IMMEDIATE ALARM RESPONSE? YES _____ NO _____

7. TYPE OF ALARM SYSTEM: BURGLARY _____ ROBBERY _____

OUTSIDE _____ TELEPHONE ALARM _____ CENTRAL STATION _____

8. PREMISES: RESIDENCE _____ STORE _____ FACTORY _____ WAREHOUSE _____

HOSPITAL _____ SCHOOL _____ TAVERN _____ RESTAURANT _____

OTHER _____

9. IS THERE A WATCHMAN OR GUARD ON THE PROTECTED PREMISES?

YES _____ NO _____ IF YES, ARE THEY ARMED? YES _____ NO _____

IF ARMED, ARE THEY IN UNIFORM? YES _____ NO _____

10. ARE THERE ANIMALS ON THE PREMISES WHILE THE ALARM IS ACTIVATED? YES _____ NO _____

IF YES, INDICATE HOW MANY AND WHAT TYPE _____

11. ARE THERE HAZARDOUS MATERIALS USED OR STORED ON THE PROTECTED PREMISES?

YES _____ NO _____

12. LISTED BELOW ARE THREE PERSONS DESIGNATED TO RESPOND TO AN EMERGENCY ALARM. ONE OF THE BELOW LISTED WILL BE AVAILABLE TO RESPOND TO THE PREMISES, WITHIN ONE HOUR, UPON REQUEST BY THE NEWARK POLICE DEPARTMENT.

THE PERSON RESPONDING WILL HAVE KEYS TO THE PREMISES AND POSSESS SUFFICIENT INFORMATION TO IDENTIFY THE ALARM SYSTEM. THE LOCATION OF THE ALARM SYSTEM AND THE LOCATION OF ANY OTHER DEFENSIVE SYSTEM ON THE PREMISES.

EACH PERSON LISTED HAS BEEN INSTRUCTED TO VERIFY ALL POLICE RESPONSE REQUESTS BY TELEPHONING THE NEWARK POLICE DEPARTMENT'S COMMUNICATION CENTER, (733-6000) PRIOR TO RESPONDING TO THE PREMISES.

I UNDERSTAND THAT THE OFFICE OF THE CHIEF OF POLICE, NEWARK POLICE DEPARTMENT, MUST BE NOTIFIED, IN WRITING, IF THERE IS A CHANGE IN DESIGNATED PERSONNEL.

A. _____
NAME TELEPHONE NUMBER

ADDRESS: NO STREET CITY STATE ZIP CODE

B. _____
NAME TELEPHONE NUMBER

ADDRESS: NO STREET CITY TELEPHONE NUMBER

C. _____
NAME TELEPHONE NUMBER

ADDRESS: NO STREET CITY STATE ZIP CODE

ALARM REGISTRANT'S SIGNATURE _____

DATE _____

OFFICIAL USE ONLY

NEW _____ RENEWAL _____ PERMIT NO. _____

DATE OF ISSUED _____ EXPIRATION DATE _____