### ---- <u>PLEASE READ</u> ----

PLEASE COMPLETE AND RETURN
BOTH THE ALARM PERMIT
APPLICATION AND THE
EMERGENCY NOTIFICATION FORM
AS SOON AS POSSIBLE.

INCLUDE A CHECK OR MONEY ORDER IN THE AMOUNT OF \$100.00 FOR THE PERMIT FEE. MAKE THE CHECK PAYABLE TO UPPER MERION TOWNSHIP.

THESE FORMS ARE CRITICAL IN THE EVENT OF A POLICE RESPONSE TO YOUR LOCATION.



# UPPER MERION TOWNSHIP POLICE DEPARTMENT

175 WEST VALLEY FORGE ROAD KING OF PRUSSIA, PA 19406-1802 Business: 610-265-3232

#### To Whom It May Concern:

Chapter 63 of the Alarm Devices Code of Upper Merion Township requires a valid permit be issued before an automatic protection device is installed. The code also requires the registration or re-registration of an alarm either by a new owner / tenant or by a business in the event of a change in trade name. Failure to obtain a permit constitutes a violation of Section 63-6 of Chapter 63 and could subject the offender to a fine of not more than \$300.00 plus the costs of prosecution.

In accordance with state law, a person who owns, uses or possesses an alarm device or automatic protection device is responsible for the maintenance of that system. A fine will be issued if a fourth or subsequent false alarm activation occurs within the current calendar year (January 1st through December 31st). On January P1 of each New Year all alarm subscriber records of activation will be reset to zero. The schedule of fines is as follows:

Offense	Fire	All Other	
1st Alarm	Warning		
2 <sup>nd</sup> Alarm	Warning		
3 <sup>rd</sup> Alarm	Warning		
4 <sup>th</sup> Alarm	\$100	\$100	
5 <sup>th</sup> Alarm	\$200	\$100	
5th & Subsequent Alarms	\$300	\$100	

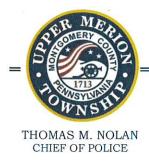
Enclosed is a permit application for your convenience. Please complete and return this application along with a check or money order made payable to Upper Merion Township in the amount of \$100.00.

Please supply EMERGENCY NUMBERS (form enclosed) to enable the Police Department to contact your representative if your alarm is activated when no one is at the location. Emergency Numbers and the exact location of your business are vital to a prompt and effective response to your alarm. If your alarm system is no longer in use, return the enclosed application with a notation that the system is not in service

Thank you for your cooperation. If you have any questions concerning the alarm ordinance or Upper Merion Township Police alarm response procedures please contact the Police Records Department at (610) 265-0383.

Very truly yours,

Michael Bruner Lieutenant, Auxiliary Services



Date

# UPPER MERION TOWNSHIP POLICE DEPARTMENT

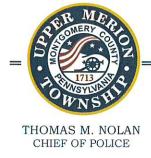
175 WEST VALLEY FORGE ROAD KING OF PRUSSIA, PA 19406-1802 Business: 610-265-3232

#### CODE OF UPPER MERION TOWNSHIP CHAPTER 63 AUTOMATIC PROTECTION DEVICE PERMIT

BUSINESS PERMIT FEE: \$100.00	DATE:		
I hereby make application for an automatic protection device permit for premises:			
BUSINESS NAME:			
ADDRESS:			
PHONE:	_		
TYPE OF BUILDING: Residential Inde	ustrial Commercial		
TYPE OF DEVICE: Hold-Up Burglar	FireMedical		
DATE OF ALARM INSTALLATION:			
INSTALLER'S NAME:	PHONE:		
MONITORING COMPANY:	PHONE:		
ADDRESS:			
Applicant's Name (Printed)	Applicant's Signature		
DO NOT WRITE BELOW THIS LINE			
The foregoing application for a permit is approved and fee has been paid.			

Permit Number

Fenella Dsouza, Police Records Division



### UPPER MERION TOWNSHIP POLICE DEPARTMENT

175 WEST VALLEY FORGE ROAD KING OF PRUSSIA, PA 19406-1802 Business: 610-265-3232

#### **BUSINESS EMERGENCY NOTIFICATION FORM – KING OF PRUSSIA MALL**

ATTN: STORE MANAGER/OWNER

Please complete and return this form to the Police Department as soon as possible. This form is critical in the event of a Police response to your location. Please supply a list of individuals to contact in the event Police must respond when no one is at location. This list should be updated on a semi-annual basis or whenever a change occurs. If your business moves to another location, please notify the Police Department.

DATE:	TYPE OF BUSINESS:			
BUSINESS NAME:	SP	PACE OR KIOSK #:		
ADDRESS:				
PHONE #:INSIDE LINE(if recorded message is used):				
BUSINESS ADDRESS:				
ALARM COMPANY:	PHONE:			
LOCATION OF STORE: Check appropriate box - ☐ Lower Level ☐ Upper Level (Please list the names of the stores on <b>EITHER SIDE</b> of your store/kiosk, in order to expedite Police response:				
List the INDIVIDUALS and their PHONE NUMBERS in the order they are to be contacted.				
(Include the area codes for all number NAME	s. Additional contacts use othe	HOME #		
T I I I I I I I I I I I I I I I I I I I		HOME #		

Chapter 63 (Alarm Devices) of the Code of Upper Merion Township requires permits for all alarm devices and authorizes fines for false activations. Contact the Upper Merion Police Records Division with any questions concerning this requirement at 610-265-0383.

The completed form may be mailed to the above address, faxed to 610-265-2711, emailed to <a href="mailed-to-fdsouza@umtownship.org">fdsouza@umtownship.org</a>,or completed online by scanning the QR Code:

