



Office of the City Clerk

Date Filed:

License No:

City Hall, 38 Hawley Street, Binghamton, NY 13901 607-772-7005

ALARM USER REGISTRATION

Fee: \$10

Property Owner Information

Name: _____

Address: _____

Phone (Home/Work/Cell): _____

Alarm User Information

Name: _____

Address: _____

Phone (Home/Work/Cell): _____

Additional Information

Address where Alarm is located: _____

Name of Alarm Installing Company: _____

Type of Alarm: Burglar Fire Panic Glass Motion Sensor

In the space below, provide detailed information on the alarm system installed on your property. Include type of device and location on property.

By signing below, I indicate that I agree to comply with all terms of the Code of the City of Binghamton Chapter 167, *Alarm Systems*, along with any subsequent amendments. I am aware that, upon receipt of this form by the City Clerk there will be no charge for the first two avoidable alarms in any given calendar year, but I will be charged for each avoidable alarm thereafter. I also understand that if an alarm is not paid within thirty days from the date of the invoice, additional penalties will occur. Any unpaid alarms will roll to the property owner's taxes and will also receive a surcharge. It is the responsibility of the tenant to notify the property owner of any and all alarm installations. Any change to the alarm system or change in property ownership, billing address or building tenants will require the alarm user and property owner to complete a new application.

Applicant Signature

Date