



**Hilliard Division of Police**

5171 Northwest Parkway, Hilliard, OH 43026  
Phone: 614.876.2429 Email: hilliardpolice@hilliardohio.gov

**ALARM PERMIT APPLICATION**

**Fee: \$25.00**

For Administrative Use Only			
Receipt #: HPDAP-	Permit #: -SR- -AP-	Issue Date:	Expiration Date:
Applicant/Business Information			
<i>Section 709.02 of the Hilliard City Code requires that individuals and businesses who maintain a security, a fire or a medical alarm system must apply biennially for a permit. If you or your business maintains an alarm system, please complete the following application in its entirety. Failure to obtain your permit could result in the issuance of a citation and fine. If you no longer maintain an alarm system, please complete the Removal Certificate on page two.</i>			
<input type="checkbox"/> New Permit		<input type="checkbox"/> Renewal. Current Permit Expires:	
Resident/Business Name:			
Street Address:		City:	Zip:
Alarm Information			
Classification of Alarm:			
<input type="checkbox"/> Audible Only <input type="checkbox"/> Fire Only <input type="checkbox"/> Medical Only <input type="checkbox"/> Direct Connect to Monitoring Company			
If Applicable, Monitoring Company Name:		If Applicable, Monitoring Company Telephone #:	
Emergency Contact Information			
<i>Please list individuals whom we can contact if your alarm activates. If the alarm is in a residence, please list contact information for the adult occupant(s) first.</i>			
Occupant Name:	Primary Phone #:	Secondary Phone #:	
Contact Name:	Primary Phone #:	Secondary Phone #:	
Contact Name:	Primary Phone #:	Secondary Phone #:	
Residential Alarm Systems			
<i>If the alarm is located in a business, skip this section. If the alarm is located in a <u>residence</u>, please read the following and check the box if the statement is applicable.</i>			
<input type="checkbox"/> I certify that I am at least sixty-five (65) years of age and that the permit being applied for pertains to my residence, not a business. Due to my age, I claim exemption from the permit fee. My date of birth is:			
<input type="checkbox"/> I certify that by nature of my occupation pursuant to ORC 149.43(A)(7), the information listed on this document is exempt from public records requests and should be kept confidential. My occupation is:			

Person Completing Form	
<p><b><i>By signing this application, I hereby apply to the Chief of Police for a security, fire and/or medical alarm permit and agree to abide by all the rules, regulations and ordinances of the city and applicable state and federal laws which govern such permit activity.</i></b></p>	
Printed Name:	Signature:
<p><b><i>Once your application is complete, please do the following:</i></b></p> <ul style="list-style-type: none"> <li>• <i>Enclose the application in an envelope.</i></li> <li>• <i>Enclose a check or money order made payable to "City of Hilliard" for the \$25.00 biennial fee. However, if the permit applies to a residence where the occupant is at least 65 years or older AND the senior citizen has marked the appropriate waiver and noted their date of birth, no permit fee is required.</i></li> <li>• <i>Mail application and \$25.00 fee to: Hilliard Division of Police License/Permit Bureau 5171 Northwest Parkway Hilliard, OH 43026</i></li> </ul>	
Special Notes	
<ul style="list-style-type: none"> <li>• <i>False or incorrect statements made on this application, misconduct on the part of the business, company or applicant, employee, or failure to conform to the rules, regulations, laws, or ordinances will be considered cause for denial, revocation of the License/Permit. Direct Connect to E-911 is prohibited.</i></li> <li>• <i>All fees are NOT refundable.</i></li> <li>• <i>Section 709.02(a.) Hilliard City Code "Equipment Maintenance and Inspection of Alarm Systems" states (in part): All equipment used in installations for which a permit is required shall meet the applicable standards of the Underwriters Laboratory of the United States of America and Canada, Factory Manual, or other recognized industry standard. Applicants may be required to submit evidence of the reliability of the equipment installed.</i></li> <li>• <i>Section 709.08, Hilliard City Code provides that no more than two (2) false alarms per permit year are allowed. An excessive number of false alarms may make you liable for a fine plus court cost and/or revocation of your permit. If you exceeded the number of permissible alarms last year, you are cautioned to take steps to repair any malfunctioning equipment and/or re-educate any persons using the alarm as to its proper operation.</i></li> <li>• <i>Per the Ohio Revised Code, information provided on this application may be considered a public record and may be subject to release through a public records request. The ORC allows certain exemptions of the public records law based on a person's occupation.</i></li> </ul>	
<p><b><i>Questions? Please call (614) 334-2439 with any questions concerning your alarm permit.</i></b></p>	

Certificate Removal	
<p><b><i>By completing the following section, I hereby certify that I no longer maintain a police/fire alarm system and request that my alarm permit information be removed from your computer.</i></b></p>	
Name:	Date Removal is Requested:
Address Where Information is to be Removed:	Have You Moved From This Location? <input type="checkbox"/> Yes <input type="checkbox"/> No