

PERMIT \_\_\_\_\_ DATE REC'D \_\_\_\_\_ AMT REC'D \_\_\_\_\_  
Above Area For City Use Only

OVERLAND PARK POLICE DEPARTMENT

ALARM USER PERMIT APPLICATION

Alarm Ordinance 5.06.030 (a) in accordance with O.P.M.C.5.06.020, every alarm user or operator shall obtain an alarm permit from the Police Department Alarm Coordinator's office prior to operation or activation of an alarm system. Alarm permits are non-transferable. Each separate building, structure, business, premise or facility maintaining one or more alarm systems must obtain an alarm user's permit. Each permit shall bear the signature of the Chief of Police or his or her designee and shall be physically kept upon the premises using the alarm system and shall be available for inspection by the Chief of Police, his or her designee or any police officer upon request.

Permit Address (Please type or print clearly)			Mailing Address (if different from permit address)		
Name _____			Name _____		
Address _____		Apt/Suite _____	Address _____		Apt/Suite _____
City _____	State _____	Zip _____	City _____	State _____	Zip _____
Telephone _____		Work/Cell _____	Telephone _____		Work/Cell _____
eMail _____			eMail _____		

*Pursuant to Alarm Ordinance 5.06.040 (d) Whenever a change occurs relating to written information required by this ordinance, the alarm user shall give notice thereof to the Alarm Coordinator's office within 15 days after such becomes effective.*

If alarm system is for a **residence** provide your Drivers License # \_\_\_\_\_ and check one of the following:  
Apartment/Condominium: Development Name \_\_\_\_\_ Duplex \_\_\_\_\_ Single Residence \_\_\_\_\_

If alarm system is for a **business** provide your Tax ID # \_\_\_\_\_ Hours of Operation \_\_\_\_\_  
and check one of the following:

Financial \_\_\_\_\_ Government \_\_\_\_\_ Health Club \_\_\_\_\_ Medical \_\_\_\_\_ Religious \_\_\_\_\_  
Restaurant/Bar \_\_\_\_\_ Retail \_\_\_\_\_ Warehouse/Storage \_\_\_\_\_ Office \_\_\_\_\_ Other \_\_\_\_\_

Name of Alarm Monitoring Company \_\_\_\_\_ Phone \_\_\_\_\_

Name of Alarm Company \_\_\_\_\_ Phone \_\_\_\_\_

For a NEW system, list the date your system was installed \_\_\_\_\_

If you took over an existing system, list the date YOU began using the alarm system. \_\_\_\_\_

Please list below the names of responsible persons to be contacted to assist police, if needed, in securing the premises or resetting a malfunctioning alarm. These are people that have a key to your home/business and know how to use your alarm system.

Name _____	Name _____
Relationship to business or to you (Manager, friend, etc.) _____	Relationship to business or to you (Manager, friend, etc.) _____
Telephone _____	Telephone _____
Work/Cell _____	Work/Cell _____

**PERMIT FEES: A one-time fee of \$10.00 is assessed for each alarm permit.** City Ordinance requires that you obtain an alarm permit before you begin using your alarm system. Failure to do so may result in a \$25 late fee.

**PLEASE ENCLOSE THE PERMIT FEE WITH YOUR APPLICATION.** MAKE CHECKS PAYABLE TO:  
OVERLAND PARK FALSE ALARM REDUCTION PROGRAM (FARP)

MAIL TO: City of Overland Park FARP PO Box 25707, Dept. 201, Overland Park, KS 66225-5707

It is very important that you fully understand how to operate your alarm system properly. If you have not received thorough training on the system's operation, please contact a reputable alarm service provider for training. Please read the alarm ordinance online at [www.crywolf.us/overlandpark](http://www.crywolf.us/overlandpark) before signing below. Your signature is required and certifies that you understand the alarm ordinance and that you will not use your alarm system until you have received adequate training in the proper use, care and maintenance of your alarm system. Your permit will be mailed to you in a few weeks. Under the current alarm ordinance, your permit will be valid for as long as you operate an alarm system at the same location. If you have any questions, please contact the False Alarm Reduction Program office at (877) 893-5265.

SIGNATURE \_\_\_\_\_ PRINT \_\_\_\_\_ DATE \_\_\_\_\_

**APPLY FOR THIS PERMIT ON-LINE AT [WWW.CRYWOLF.US/OVERLANDPARK](http://WWW.CRYWOLF.US/OVERLANDPARK)**