



BURLINGTON POLICE DEPARTMENT
One North Avenue
Burlington, Vermont 05401

Brandon del Pozo
Chief of Police

Phone (802) 658-2704
Fax (802) 865-7579
Business Office Fax (802) 864-5945
TTY/TDD (802) 658-2700

TO: Property Owners

The City of Burlington Ordinance relating to the Regulation of Security Alarm Systems, as revised and signed by the Mayor on July 14, 2004, is attached. Permits are required and contact information must be provided. The annual permit fee of \$36.00 is billed in July of each year. New permits will be assessed on a pro-rated basis of \$3.00/month through June 30th.

It is the owners' responsibility to ensure that current contact information is provided to the Burlington Police Department. Please inform those who will be operating or testing your alarm system that there are response charges that will be assessed per the enclosed ordinance.

Response charges shall be assessed as follows for the period between July 1 and June 30:

First response	-	Warning
Second response	-	Warning
Third response	-	\$70.00
Fourth response	-	\$100.00
Fifth or subsequent response	-	\$150.00

Also enclosed is an alarm permit application. Please complete this form and return it to the Burlington Police Department, c/o Security Alarm Permit. You will be billed for the permit fee upon receipt of the application in the Business Office. The permit will be mailed upon receipt of the fee.

Failure to obtain a permit will result in a fine of up to \$500.00.

If you have any questions, please don't hesitate to contact us at the Business Office at (802) 540-2107.

Sincerely,

Lise E. Veronneau, Business Manager
BURLINGTON POLICE DEPARTMENT

PERMIT NUMBER: _____
(to be issued by Burlington Police)



BURLINGTON POLICE DEPARTMENT
One North Avenue
Burlington, Vermont 05401

**PERMIT APPLICATION FOR INSTALLATION OF
SECURITY ALARM SYSTEM**

Date: _____

Name of Business/Residence Owner: _____

Physical address of **business/residence** where the alarm is/will be installed. Please include the full address and zip code of the alarmed location:

Billing Contact Name: _____ Primary Telephone Number: _____

Billing Address: _____

Email Address: _____ Secondary Telephone Number: _____

Alarm Company that monitors the alarmed location (name & address):

Contact name, address & telephone number of at least two keyholders/people to contact when business is closed or resident is away. (These people may have the security codes for the alarm, or are allowed access to business/residence with police escort if needed, when the owner can't be contacted):

1.

2.

Please return to: Burlington Police Department, Attn: Security Alarms, One North Avenue, Burlington, VT 05401. Call (802) 540-2107 with any questions.

WARNING: Failure to obtain a permit may result in a fine up to \$500.00

Respect ~ Honor ~ Remember

Officer James W. McGrath, end of watch May 12, 1904; Officer J. Albert Fisher, end of watch December 15, 1947