



Sumner Police Department  
 1104 Maple St Suite 140  
 Sumner WA 98390-1423  
 253-863-6384

**One Time Fee: \$25**  
 Senior Waiver (Age 65) \_\_\_\_\_

**Office Use Only**  
 Permit # \_\_\_\_\_  
 Clerk: \_\_\_\_\_  
 Amount: \_\_\_\_\_  
 Date Issued: \_\_\_\_\_

**ALARM REGISTRATION APPLICATION**

DATE \_\_\_\_\_  NEW  UPDATE  REPLACE DECAL # \_\_\_\_\_

**I. SUBSCRIBER INFORMATION**

(PLEASE TYPE OR PRINT LEGIBLY WITH BALLPOINT PEN)

If this is a rental, is subscriber: Landlord?  Tenant?   Both (For business in home, complete both sections below)

Residential Permit (List both spouse names)  
 Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_

Work #: (\_\_\_\_) \_\_\_\_\_ Name: \_\_\_\_\_

Work #: (\_\_\_\_) \_\_\_\_\_ Name: \_\_\_\_\_

Pager/Cell # (\_\_\_\_) \_\_\_\_\_ Name \_\_\_\_\_

Alarm Street Address (If different than mailing address): \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ - \_\_\_\_\_

Commercial / Nonresidential Permit  
 Business Name \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Phone: (\_\_\_\_) \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact's Home Phone: (\_\_\_\_) \_\_\_\_\_

Contact's Other Phone: (\_\_\_\_) \_\_\_\_\_

Alarm Street Address (If different than mailing address): \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ - \_\_\_\_\_

**II. ALARM COMPANY INFORMATION**

ALARM COMPANY \_\_\_\_\_ PHONE \_\_\_\_\_

TYPE OF ALARM:  AUDIBLE  SILENT  INTRUSION / BURGLAR  DURESS / HOLDUP  
 (Check all that Apply)

**III. EMERGENCY NOTIFICATION**

LIST TWO RESPONSIBLE REPRESENTATIVES (OTHER THAN THE APPLICANT) WHO CAN AND WILL RESPOND WITHIN 30 MINUTES TO AN ALARM ACTIVATION TO ASSIST THE POLICE IN DETERMINING THE CAUSE OF THE ALARM ACTIVATION AND TO SECURE THE PREMISES.

Name: \_\_\_\_\_ Home: \_\_\_\_\_ Work: \_\_\_\_\_ Other: \_\_\_\_\_

Name: \_\_\_\_\_ Home: \_\_\_\_\_ Work: \_\_\_\_\_ Other: \_\_\_\_\_

CITY OF SUMNER CODE, SECTION 9.10, REQUIRES ALL BUSINESSES AND RESIDENCES WITH BURGLARY ALARM SYSTEMS TO HAVE VALID ALARM REGISTRATIONS. FAILURE TO COMPLETE THIS APPLICATION, OR TO PAY YOUR \$25 FEE COULD RESULT IN NO POLICE RESPONSE TO YOUR ALARM SYSTEM, AND/OR A PENALTY OF \$50 OR MORE.

REGISTRATION OF AN ALARM SYSTEM DOES NOT CREATE A CONTRACT, DUTY OR OBLIGATION, EITHER EXPRESSED OR IMPLIED, FOR POLICE TO RESPOND. ANY AND ALL LIABILITY AND CONSEQUENTIAL DAMAGE RESULTING FROM THE FAILURE TO RESPOND TO A NOTIFICATION IS HEREBY DISCLAIMED, AND GOVERNMENTAL IMMUNITY AS PROVIDED BY LAW IS RETAINED. BY REGISTERING AN ALARM SYSTEM, THE USER ACKNOWLEDGES THAT ANY POLICE RESPONSE MAY BE BASED ON FACTORS SUCH AS AVAILABILITY OF POLICE UNITS, PRIORITY OF CALLS, WEATHER CONDITIONS, TRAFFIC CONDITIONS, EMERGENCY SITUATIONS, AND STAFFING LEVELS.

SIGNATURE \_\_\_\_\_

- HELP PREVENT FALSE ALARMS -

**Return Completed Form To:**  
 Sumner Police Department  
 1104 Maple Street, Suite 140  
 Sumner WA 98390-1423