



**POLICE DEPARTMENT**  
 33325 8TH AVENUE SOUTH, SUITE 101  
 FEDERAL WAY, WA 98003  
 (253) 835-6700

ONE TIME FEE: \$25

WAIVER:

SENIOR (AGE 62)

OFFICE USE ONLY	
PERMIT #:	_____
CLERK:	_____
AMOUNT:	_____
DATE ISSUED:	_____
RECEIPT #:	_____

# ALARM REGISTRATION APPLICATION

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

## I. SUBSCRIBER INFORMATION

(PLEASE TYPE OR PRINT LEGIBLY)

COMMERCIAL  RESIDENTIAL HOME PHONE \_\_\_\_\_

BUSINESS/RESIDENT'S NAME \_\_\_\_\_ CELL PHONE \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

OWNER'S NAME \_\_\_\_\_ ALTERNATE PHONE \_\_\_\_\_  
 (IF DIFFERENT)

BILLING/MAILING ADDRESS \_\_\_\_\_

## II. ALARM COMPANY INFORMATION

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

TYPE OF ALARM:  AUDIBLE  SILENT  NOT MONITORED BY AN ALARM COMPANY

## III. EMERGENCY NOTIFICATION

LIST TWO RESPONSIBLE REPRESENTATIVES (OTHER THAN THE APPLICANT) WHO 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. IF UNABLE TO RESPOND WITHIN 30 MINUTES, LIST SOMEONE WHO IS ABLE TO GET IN CONTACT WITH YOU.

1. NAME \_\_\_\_\_

DAY TELEPHONE (\_\_\_\_\_) \_\_\_\_\_ NIGHT TELEPHONE (\_\_\_\_\_) \_\_\_\_\_

2. NAME \_\_\_\_\_

DAY TELEPHONE (\_\_\_\_\_) \_\_\_\_\_ NIGHT TELEPHONE (\_\_\_\_\_) \_\_\_\_\_

CITY OF FEDERAL WAY ALARM ORDINANCE #11-693, 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.

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 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 \_\_\_\_\_

<p>MAKE CHECKS PAYABLE TO CITY OF FEDERAL WAY          MAIL TO : FEDERAL WAY POLICE DEPT.          33325 8TH AVENUE SOUTH, SUITE 101          FEDERAL WAY, WA 98003</p>
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**HELP PREVENT FALSE ALARMS**