2025/2026 ALARM REGISTRATION FORM

Registrations are valid for Two Years

This registration period begins on January 1, 2025 and will expire on December 31, 2026

Barnstable Police Department Use Only
Permit # _____
Site # _____

☐ **New Registration** ☐ **Renewal Registration**

Fee = $35.00

Add a $10 late fee for all registrations submitted after January 31, 2025 or 30 days after installation, takeover, or activation of alarm system

Check or money order should be made payable to: Town of Barnstable

We are no longer issuing a decal/sticker

Completed registration forms may be dropped off or mailed to:

Barnstable Police Department
Attn: Alarm Administrator
1200 Phinney's Lane
Hyannis, MA 02601

LOCATION OF ALARM ◯ Business ◯ Residential

Name of Resident or Business:

Street Address of Residence or Business:

City, State, Zip Code:

Phone # at Alarm Location:

Special Instructions or Notes: Directions (if location is difficult to locate) or Hazards (dogs, swimming pools, clotheslines, firearms, firepits or other)

PERMITTEE – All alarms, residential or business, must have **AN INDIVIDUAL** who is responsible for the alarm.

Name:

Date of Birth:

Phone #:

Email Address: Valid email is imperative for future email renewal reminders:

BILLING ADDRESS

Billing Address (Street or P. O. Box):

Billing City, State, Zip Code:

ALARM COMPANY/MONITORING COMPANY

Alarm Company Name:

Alarm Company Phone #:

Alarm Monitored: ◯ Yes ◯ No

Alarm Monitoring Company Name:

CONTACT PERSONS (Permittee can be a contact)

1. Name of First Person to Call:

Phone #:

2. Name of Second Person to Call:

Phone #:

I, the undersigned, have read the Town of Barnstable's regulations in regard to the registration and use of alarm systems within the town. (Copies of the regulations are available at the Barnstable Police Facility or on-line, **www.barnstablepolice.com**).

I also understand that by signing this form, I accept responsibility for any and all fines that may be assessed in accordance with the town ordinance. In the event any of the information I have provided changes, I agree to notify the Barnstable Police Department immediately.

I understand that police response to an alarm is not mandated and that any response may be influenced by factors including, but not limited to: the availability of police units, priority of calls, weather conditions, traffic conditions, emergency conditions, and staffing levels. No person may rely upon any expected response by the Barnstable Police Department to any alarm site or system.

Signature: _____ **Date:** _____ For alarm related questions please call 508-778-3824

Barnstable Police Department Office Use Only

Issued On: Issued By: Type of Remittance: Remittance ID: Notes: