



**KENNETH W. LACK**  
CHIEF OF POLICE

SERVING THE VILLAGES OF  
★ BROOKVILLE ★ COVE NECK ★ MATINECOCK ★ MILL NECK

## **BROOKVILLE POLICE DEPARTMENT**

195 BROOKVILLE ROAD • BROOKVILLE, NEW YORK 11545

EMERGENCY: 911      OFFICE: 516-440-2300

EMAIL: KLACK@BROOKVILLEPOLICENY.GOV

Dear Resident,

Enclosed please find your Burglar Alarm Renewal Application. Please take a moment to update the Department on the status of your Burglar Alarm noting any system, alarm company or emergency contact changes.

Please be advised that in accordance with Local Law all alarm systems are required to be inspected for technical competency by a New York State licensed alarm company agent.

All inspections shall include the following system checks which shall be noted on the enclosed "Alarm Inspection Certificate".

1. The system's power while underload (while system is in actual operation).
2. The rechargeable battery or dry cell that is used in the event of a power outage.
3. All connections on the central control panel.
4. All door and window contacts.
5. All motion detectors and special detection devices.
6. Any worn parts in the system.
7. Audible bell or siren.
8. Communications to Central Station and/ or Police Headquarters.
9. All emergency (panic) buttons.

In addition, please remit the required \$20.00 renewal fee, payable to the Brookville Police Department. If you have any questions, please contact this office at 516-440-2300.

You can pay and fill out the required information on our **website** [www.brookvillepoliceny.gov](http://www.brookvillepoliceny.gov) or mail us the check and the required information.

These regulations have been adopted as part of a continuing effort to reduce false alarms.

Very Truly Yours,

Kenneth Lack  
Chief of Police

**NEXT TO BE MAILED OUT IN AUGUST**  
**BROOKVILLE POLICE DEPARTMENT FALSE**  
**ALARM REDUCTION EFFORT**  
**RECOMMENDED PREVENTION TECHNIQUES**

- 1) Utilize your Brookville Police Department cancellation code in any circumstance where you suspect you may have activated your alarm system in error.
- 2) Notify your alarm servicing company immediately of any irregular condition or symptoms that may affect proper operation especially if you have trouble disarming your system.
- 3) Educate household members and employees of cancellation codes and alarm operation.
- 4) Before you arm your system, check that all protected doors and windows are properly locked or latched. Many unnecessary alarms are caused by doors/windows opened by the wind, pets, visitors, etc. Repair/replace unreliable latches. Do not rely on a system "ready light", it cannot tell if doors are fully latched or if windows are fully closed. You must check this every time yourself.
- 5) Before you arm your system, check all areas covered by motion sensors. Look for anything that might trip the sensor: Halloween decorations, flickering Christmas or window lights, rotating Christmas trees, space heaters, balloons, hanging signs, etc.
- 6) Leave premises promptly after arming. Disarm promptly after entering. If you forget something just after leaving disarm the system and start over. Don't try to "beat the clock!".
- 7) Warn all occasional users, such as cleaning services, real estate agents and visiting family members, not to enter your premises unless they can competently disarm your systems.
- 3) Keep your Police Department and alarm company up to date on changes in the names or phone numbers for yourself and all other key holders or alarm respondents. Provide an adequate list of vacation time key holders who can respond in a timely manner. Be sure your house number or name is clearly visible from the road.
- 9) If you plan to leave for extended periods of time, check with your alarm company before lowering the heat. Cold temperature may affect the proper operation of many alarm sensors and control equipment. Always notify the Brookville police Department of any extended absences or vacation.
- 10) Conform with local laws requiring yearly inspection. All contacts, sensors, back up equipment and audible devices should be checked and properly maintained.



**BROOKVILLE POLICE DEPARTMENT**  
195 Brookville Road, Brookville, NY 11545  
**ALARM USER PERMIT RENEWAL APPLICATION**

**Serving the Villages of:**  
**Brookville, Matinecock, Mill Neck, Cove Neck**

YOUR PERMIT IS **EXPIRING** & MUST BE RENEWED BY:

PLEASE REMIT **\$20.00** RENEWAL FEE PAYABLE TO: **BROOKVILLE POLICE DEPARTMENT WITH APPLICATION**

**Instructions:** All Questions **MUST** be answered completely & **WRITTEN CLEARLY**

**Contact Information:** HOME: \_\_\_\_\_ CELL: \_\_\_\_\_

**TYPE OF ALARM:** ( ) CENTRAL STATION ( ) EXTERIOR BELL/SIREN

**PERSONS TO BE CONTACTED IN CASE OF EMERGENCY:** (REFER TO ITEM NO. 6 OF AGREEMENT BELOW)

#1 \_\_\_\_\_ TEL: # \_\_\_\_\_  
HOME AND/OR CELL #

#2 \_\_\_\_\_ TEL: # \_\_\_\_\_  
HOME AND/OR CELL #

**HAS SYSTEM BEEN MODIFIED SINCE INSTALLED, OR SINCE APPLICATION FOR PERMIT OR RENEWAL?**

( ) YES ( ) NO EXPLAIN: \_\_\_\_\_

**AGREEMENT**

**IT IS UNDERSTOOD THAT:**

1. The alarm system is considered only as a convenience to the permit holder or authorized occupant and an operational aid to the police.
2. The police shall not be held liable for any failure to respond to an alarm.
3. This application is subject to the approval of the Chief of Police and may be revoked by the Chief of Police.
4. The permit holder shall allow inspection of the alarm system by authorized representatives of the police.
5. If the alarm is activated and the permit holder or authorized occupant is absent from the premises protection by the alarm, the police shall be permitted to enter the premises without incurring any liability for the purpose of:
  - a. searching for intruders
  - b. extinguishing fires
  - c. making necessary adjustments to the alarm system
6. The applicant agrees to designate a friend, neighbor, relative or other person to hold and have available to the police, a key to the premises and a key or code to the alarm system
7. All outside audible alarm systems shall have an automatic cut-off set for not more than fifteen (15) minutes.
8. The alarm system has an audible signal which can be clearly heard in all portions of the protected structure when the alarm system is automatically activated, except for a silent panic or hold-up activation.
9. The alarm system contains a 30 second time lapse between initial activation of the alarm system and transmission of the alarm signal to the Police Department or Central Station with an abort feature or alternate means of cancelling the signal within the 30 second period. An abort feature shall not be required for devices specifically designed to enable an alarm user to intentionally activate the alarm system.
10. The approval of the Police Department as to the suitability and quality of all devices, equipment and hardware and the approval of the Underwriters Laboratories.
11. The alarm system contains such other technical features or requirements as shall be provided in the rules and regulations governing alarm systems.
12. The applicant hereby acknowledges that: He/She has read or is familiar with the Village General Ordinance regarding alarm systems. He/She shall be responsible to **PAY ALL CHARGES FOR FALSE ALARMS.** The alarm system must be maintained by a **LICENSED INDIVIDUAL OR FIRM.** An Alarm User Permit is issued **BEFORE** an alarm system is modified.

**SIGNATURE OF APPLICANT:** \_\_\_\_\_

Please turn over to complete—>

**BROOKVILLE POLICE DEPARTMENT**  
195 Brookville Road, Brookville, NY 11545  
**ALARM USER PERMIT RENEWAL APPLICATION**  
Serving the Villages of:  
Brookville, Matinecock, Mill Neck, Cove Neck

***YOUR PERMIT IS EXPIRING AND MUST BE RENEWED BY:***

***PLEASE REMIT \$20.00 RENEWAL FEE PAYABLE TO:***  
***BROOKVILLE POLICE DEPARTMENT WITH APPLICATION***

**ALARM INSPECTION CERTIFICATE**

**ALL INFORMATION MUST BE COMPLETED BY ALARM COMPANY REPRESENTATIVE**

**Alarm Company Certification that system is in proper working order at time of inspection**

**Resident Name:** \_\_\_\_\_

**Resident Address of Inspection:** \_\_\_\_\_

---

NYS Business License # \_\_\_\_\_

Servicing Alarm Company Name: \_\_\_\_\_

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

Phone # \_\_\_\_\_

Make of Alarm Equipment: \_\_\_\_\_ Date of Inspection: \_\_\_\_\_ Condition: \_\_\_\_\_

Parts Replaced/System Adjustments \_\_\_\_\_

**Signature of Company Representative:** \_\_\_\_\_

---

**FOR OFFICE USE ONLY:**

Please turn over to complete—>

BROOKVILLE POLICE DEPARTMENT  
195 BROOKVILLE ROAD, BROOKVILLE, NY 11545

CENSUS INFORMATION

OWN OR RENT

OWNER LAST NAME: \_\_\_\_\_ FIRST \_\_\_\_\_

MARRIED: Y / N SPOUSE/PARTNER FIRST NAME: \_\_\_\_\_

IF RENTING: (RENTER: LAST NAME: \_\_\_\_\_ FIRST \_\_\_\_\_

MARRIED: Y / N SPOUSE/PARTNER FIRST NAME: \_\_\_\_\_

LOCATION ON PROPERTY: EX: COTTAGE, MAIN HOUSE, OTHER: \_\_\_\_\_

*(CONTINUE FILLING OUT INFORMATION BELOW WITH YOUR INFORMATION)*

ADDRESS: \_\_\_\_\_ VILLAGE: \_\_\_\_\_ ZIP \_\_\_\_\_

TELEPHONE: HOME: \_\_\_\_\_ CELL # (s): \_\_\_\_\_

BUSINESS: OCCUPATION/POSITION: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_ PH #: \_\_\_\_\_

CHILDREN: Y / N: IF YES...HOW MANY: \_\_\_\_\_ AGES: \_\_\_\_\_

HOUSEHOLD HELP: Y / N IF YES... F/T OR P/T OR LIVE IN

DOGS: Y / N , IF YES, HOW MANY \_\_\_\_\_ TYPE(S): \_\_\_\_\_

OWN GUNS: Y / N , IF YES,

TYPE: \_\_\_\_\_ QTY. \_\_\_\_\_ DESCRIPTION(S) \_\_\_\_\_

IF PISTOLS: PERMIT # \_\_\_\_\_ TYPE: \_\_\_\_\_ COUNTY OF ISSUE: \_\_\_\_\_

EMERGENCY CONTACTS:

NAME: \_\_\_\_\_ HOME: \_\_\_\_\_ CELL: \_\_\_\_\_

NAME: \_\_\_\_\_ HOME: \_\_\_\_\_ CELL: \_\_\_\_\_

MISCELLANEOUS INFO (HEALTH CONDITIONS, HANDICAPS, GATE CODES, ETC: