

VILLAGE OF BRIARCLIFF MANOR  
1111 PLEASANTVILLE ROAD  
BRIARCLIFF MANOR, N.Y. 10510



WWW.BRIARCLIFFMANOR.GOV  
TELEPHONE: (914) 941-4801  
FAX: (914) 941-4837

Dear Home/Business Owner:

Pursuant to Chapter 69 of the code of the Village of Briarcliff Manor, all residences and businesses with a police and fire alarm system must be registered. If you fail to register and the Police or Fire Department is summoned to your home for a false alarm, you will be subject to a \$250.00 fine.

Please note if the property changes ownership a new application and fee must be submitted.

Rates effective June 1, 2022:

- New permit \$80.00
- Annual renewal \$50.00

The law specifies a system of charges for false alarms initiated by a police or fire alarm device in any one year as follows:

1-2 false alarms per year	\$ 0.00
3 false alarms per year	\$100.00
4 false alarms per year	\$150.00
Any additional false alarms per year	\$250.00

If a false alarm should occur on your premises, the Briarcliff Manor Police Department will notify you by mail that the incident occurred and the applicable fine.

Please complete the enclosed application with remittance payable to: *Village of Briarcliff Manor*.

Sincerely,

*Dominick Bueti*

Chief of Police

Village of Briarcliff Manor  
Application for Permit to  
Operate an Alarm System

**OFFICE USE ONLY**

Date Received: \_\_\_\_\_  
Fee Paid: \_\_\_\_\_  
Approved By: \_\_\_\_\_  
Permit #: \_\_\_\_\_  
Mailed on: \_\_\_\_\_

**I. PERSONAL INFORMATION:**

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

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

Phone Numbers: \_\_\_\_\_  
Home Work

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

**II. TYPE OF ALARM SYSTEM(S):**

\_\_\_\_\_ Fire \_\_\_\_\_ Burglar/Fire Combination  
\_\_\_\_\_ Burglar \_\_\_\_\_ Burglar/Panic/Fire Combination  
\_\_\_\_\_ Burglar/Panic Combination \_\_\_\_\_ Carbon Monoxide

**III. EMERGENCY CONTACTS:**

(Those who are authorized to have access to your home in case of an emergency)

a. Name: \_\_\_\_\_

Phone: \_\_\_\_\_

b. Name: \_\_\_\_\_

Phone: \_\_\_\_\_

**IV. THIS APPLICATION IS FOR:**

\_\_\_\_\_ A new installation

\_\_\_\_\_ A modification to an existing system

\_\_\_\_\_ An existing system

V. **THIS SYSTEM:**

\_\_\_\_\_ Will be connected to a private alarm station

\_\_\_\_\_ Will not be connected to any alarm monitoring facility

VI. **TYPE OF ALARM DEVICE:**

\_\_\_\_\_ Digital Dialer

\_\_\_\_\_ Direct Line

\_\_\_\_\_ An Audible Bell Only

**NOTE:** Any audible sounds coming from an alarm system must cease after 10 minutes per Village Law

VII. **ALARM SYSTEM COMPANY:**

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

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

Phone Number: \_\_\_\_\_

Alarm Equipment Manufacturer: \_\_\_\_\_

**NOTE:** Village Law REQUIRES that your alarm company must have a VALID New York State license to install, service and maintain an alarm.

VIII. **ADDITIONAL INFORMATION:**

Any additional information which may assist Police and/or Fire Department personnel in responding to any calls for service at your residence (i.e.: additional phone numbers, handicapped information, etc.)

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**IX. FEE:**

\_\_\_\_\_ \$80.00 Permit Fee

**X. MAILING INFORMATION:**

Please mail this application along with the permit fee to:

Village of Briarcliff Manor  
Police Department  
1111 Pleasantville Road  
Briarcliff Manor, NY 10510

**XI. VILLAGE CODE:**

A copy of Chapter 69, entitled "Alarms" of the Code of the Village of Briarcliff Manor is available on our website: [www.briarcliffmanor.gov](http://www.briarcliffmanor.gov).

**XII. STATEMENT OF LEGAL RESPONSIBILITY:**

I hereby submit to the jurisdiction of the Court of the Village of Briarcliff Manor in connection with the Alarm Local Law and agree to be bound by the provisions of the Alarm Law, as may be amended, from time to time.

I also agree to comply with the Village fee schedule for alarm malfunctions, false alarms, and recognize that failure to pay the appropriate fines after the applicable dispute resolution with the Board of Trustees will make me subject to a disconnection of my alarm from Police Headquarters and further penalties under the Village's Alarm Law.

Print Name: \_\_\_\_\_

Dated: \_\_\_\_\_

Signature: \_\_\_\_\_