

FALSE ALARM BILLING AND ALARM PERMIT RENEWALS

TO:

The City of Show Low requires anyone with an alarm to have an alarm permit. The cost is \$20 per calendar year; the fee is due every year in January or when an alarm system is installed.

Sec. 4-2-4. Permits and fees.

- (a) Every alarm user shall obtain an alarm users permit from the Show Low Police Department for each alarm system. Such permit shall be obtained within sixty (60) days from the effective date of this article or prior to the use of an alarm system which is installed subsequent to the expiration of sixty (60) days of the effective date of this article.
- (b) The fee for alarm permits shall be established by resolution adopted from time to time by the city council.
- (c) The alarm users permit shall be physically displayed within the premises using the alarm system and should be available for inspection by the police department.
- (d) Permits are not transferable from one user to another or from one address to another.
- (e) If the residential alarm user is over the age of sixty-five (65) and is the primary resident of the residence, and if no business is conducted within the residence, the alarm users permit may be obtained from the Show Low Police Department without payment of the fee.
- (f) The alarm system receivers which are currently installed within the Show Low Police Department communications center shall be removed within one year of the effective date of this article. This subsection does not apply to government alarm systems.
- (g) Any alarm system which has false alarms within one permit year shall be subject to penalty assessments as established by resolution adopted from time to time by the city council and any alarm system which has twenty (20) false alarms or more within one permit year shall be subject to permit revocation as hereafter provided.

The false alarm charges for businesses and homeowners are as follows:

1-4 False Alarms	No Charge
5-9 False Alarms	\$50 each alarm
10-14 False Alarms	\$100 each alarm
Above 15 False Alarms	\$200 each alarm

When a business or residence with an alarm has over four false alarms, bills will be sent out for the amount due on the number of false alarms received from that location in a year. Also, if a business or residence has any false alarms during the preceding year, they will be billed for the following year's alarm permit renewal, which is \$20.00. If no false alarms are received, the next year's alarm permit is given at no charge.

INVOICE ATTACHED and if NEW account an APPLICATION is attached – Please fill out and sign BOTH sides of the attached application.

PLEASE SEND YOUR PAYMENT AND THE COMPLETED APPLICATION TO:

**CITY OF SHOW LOW – FINANCE DEPT.
180 N. 9th STREET
SHOW LOW, AZ 85901**

New OR Renewal

SL Acct# _____

SHOW LOW POLICE DEPARTMENT

RESIDENTIAL OR BUSINESS ALARM SYSTEM APPLICATION

NAME _____
PHYSICAL ADDRESS _____
MAILING ADDRESS _____
PHONE NUMBER _____

ARE YOU 65 OR OLDER AND ELIGIBLE TO BE EXEMPT FROM ANNUAL RENEWAL FEES: Yes _____ No _____

Is this alarm system monitored by someone other than yourself?
Yes _____ No _____

If yes, furnish the following information:

MONITOR NAME _____
MAILING ADDRESS _____
TELEPHONE NUMBER _____

Please list two (2) persons who have access to the business/residence in case of any alarm or an emergency:

NAME _____ NAME _____
ADDRESS _____ ADDRESS _____
DAY PHONE _____ DAY PHONE _____
NIGHT PHONE _____ NIGHT PHONE _____

ANY CHANGE IN THE ABOVE NAMES MUST BE REPORTED TO THE POLICE DEPARTMENT IMMEDIATELY.

PLEASE BRING OR MAIL YOUR COMPLETED APPLICATION AND PAYMENT OF \$20.00 TO:

CITY OF SHOW LOW
ATTN: FINANCE DEPT
180 N. 9TH ST.
SHOW LOW, AZ 85901

SIGNATURE, ALARM OWNER

DATE

ALARM PERMIT WILL NOT BE ISSUED IF THE REVERSE SIDE OF THIS FORM IS NOT COMPLETED AND COMPLIED WITH.

OFFICE USE ONLY

____ Paid or Exempt Cash or Check # _____
____ Copy to Lynn at Finance
____ Copy to Dispatch
____ Added to master list
____ Added to mailing label list
____ Added to alarm doc
____ Mailed 20__ permit.
Date: _____



AFFIDAVIT DEMONSTRATING LAWFUL PRESENCE IN THE UNITED STATES

ARS §1-502 requires that any person who applies to the City for a local public benefit (defined as a business license, grant, contract or loan) must demonstrate that he/she is lawfully present in the United States through the presentation of one (1) of the following documents.

Please place a check mark next to the applicable document and present the document to the City employee. If mailing the document, attach a copy of the document to this Affidavit. (If the document says on its face that it may not be copied or you know for reasons of confidentiality that it cannot be copied, you will need to present the document in person to the City for review and signing of the affidavit.)

- Arizona Driver License issued after 1996.**
Print first 4 numbers/letters on license:

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- Arizona Non-Operating Identification License.**
Print first 4 numbers/letters on license:

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- Birth Certificate or Delayed Birth Certificate issued in any state, territory or possession of the United States**
Year of birth: _____ . Place of birth: _____ .
- U. S. Certificate of Birth Abroad.**
Year of birth: _____ . Place of birth: _____ .
- U. S. Passport.**
Print first 4 numbers/letters on passport:

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- Foreign Passport with a United States Visa.**
Print first 4 numbers/letters on passport:

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Print first 4 numbers/letters on visa:

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- I-94 Form with a photograph.**
Print first 4 numbers on I-94:

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- USCIS Employment Authorization Document (EAD).**
Print first 4 numbers/letters on EAD:

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or Permanent Resident Card (acceptable alternative):

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- Refugee Travel Document.**
Date of issuance: _____ ; Refugee Country: _____ .
- U. S. Certificate of Naturalization.**
Print first 4 numbers/letters of CIS Reg. No.:

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- U.S. Certificate of Citizenship.**
Date of issuance: _____ ; Place of issuance: _____ .
- Tribal Certificate of Indian Blood.**
Date of issuance: _____ ; Name of tribe _____ .
- Tribal or Bureau of Indian Affairs Affidavit of Birth.**
Year of birth: _____ . Place of birth: _____ .

I swear or affirm, under penalty of perjury, that I presented the document marked above to the City of Show Low, that I am lawfully present in the United States, that the document I presented to establish this presence is true, and that I am the person stated on the document.

Signature

Business/Company

Print Name

Address

Date: _____

City, State, Zip Code

For Office Use Only:
Employee Name: _____ Date: _____
Promptly report all observed violations of federal immigration law to (866) 347-2423 or by emailing azicereport@dhs.gov.
 Reported violation (check if applicable); Date/Time Reported: _____