PRESCOTT POLICE DEPARTMENT

ALARM ASSESSMENT APPEAL PETITION

If you feel that you were unjustly charged for a false alarm based on cause or exemption under Alarm Ordinance #4760-1111 (City Code: Title V, Chapter 6, Alarm Systems) and would like to have the charge reconsidered, please complete all requested information and submit to the Alarm Coordinator at the address below. Your appeal will be reviewed by the Chief of Police or his designee and you will receive a notice of determination.

PLEASE PROVIDE AS MUCH JUSTIFICATION DETAIL AS POSSIBLE. If you have any questions, please contact the Alarm Coordinator at (928) 777-1906 or suzan.belile@prescott-az.gov.

ALARM ADDRESS:		
Name:		Phone Number:
Street Address:		
City:	State:	Zip Code:
Mailing Address (if different from above):		
City:	State:	Zip Code:
Date of Alarm Being Appealed:	Invoice #:	Amount being Appealed:
Reason for Appeal (please explain in detail):		
Has your alarm company been notified?	Yes ☐	No ☐
Signature:		Date:

☐ Approved ☐ Denied By: _____ Date: _____ ☐ System Updated	☐ Fees of $ _____ have been waived and new balance is: $ _____	☐ Fees have not been waived. ☐ Fees have been reduced from $ _____ to $_____ *Remit payment to:* City of Prescott False Alarm Receivables 201 S. Cortez Street Prescott, AZ 86303

SUBMIT SIGNED, COMPLETED FORM TO:

Prescott Police Department
Alarm Coordinator
222 S. Marina Street
Prescott, AZ 86303

Phone: (928) 777-1906 Fax: (928) 778-3739 Email: suzan.belile@prescott-az.gov