

POLICE DEPARTMENT

RESIDENTIAL/BUSINESS ALARM SUBSCRIBER:

Enclosed is information needed to register your alarm system with the Lee's Summit Police Department, as required by City ordinance. Please review the ordinance (Lee's Summit Code of Ordinances Article IV, Sec. 22-77.A.), complete and return the attached Alarm Subscriber Permit Application. There is a \$50 fee to register your alarm system. There are instructions for payment at the bottom of the application.

Information on your completed application will be entered into a database at the police department and can be made available to officers in answering alarm calls at your location.

Upon receipt of the application fee, and approval of your Alarm Subscriber Permit Application, you will receive an alarm identification number, and alarm identification sticker (to be displayed on a window or door) which indicates that your system is registered with the Lee's Summit Police Department.

If you have any questions, call the Alarm Coordinator at 816-969-1719. Monday through Friday, 7:00 am to 5:00 pm.

Sincerely,

Kristie Mitchell Alarm Coordinator

LEE'S SUMMIT POLICE DEPARTMENT **ALARM SUBSCRIBER PERMIT**

Date Of Application: 11/14/2024		Date Alarm Placed In Service: 12/12/2024				
Please check one of the follow	ving:					
,		Transfer	□ Upo	date Only		
BUSINESS OR RESIDENT						
TM Fieldhouse, LLC						
Last Name First Name			Middle Initial			
ADDRESS (Location of Alarr	,					
1550 SE Hamblen Rd, Lees Summit, MO 64063				Suite/Apartment		
Street Number St	reet Number Street Name			Zip Code		
PROPERTY OWNER NAME AND BILLING ADDRESS (If Different From Above)						
Name	Address	Suite/Apartment City			Zip Code	
PHONE NUMBER:	ALTERNATE:					
EMERGENCY CONTACT	ADDRESS Phone Num				Phone Number	
Rachel Mullin	2720 SE 3rd St, Lees Summit, MO 64063				816-674-8821	
EMAIL ADDRESS OF SUBSCRIBER	Rachel@TMFieldhouse.com					
TYPE OF ALARM: (Check all applicable)		Intrusion _	7	Hold-Up	Outside Audible*	
*If Outside Audible is checked, will this system cease to emit and audible sound after 15 minutes of activation? YES NO						
Name and address of firm installing (or who has already installed) the system:						
Everon 15443 W 100th Terr Lenexa				KS	66219	
Name Stre	et Address	City		State	Zip Code	
Is Alarm Monitored by an Alarm Service? YES ☑ NO □						
Signature of Subscriber:**			Date:			
That Ill				11/14/2024		
Return this completed permit and your remittance of \$50 to:						

Lee's Summit Police Department 10 NE Tudor Lee's Summit, MO 64086 Attn: Records Unit

Checks should be made payable to "City of Lee's Summit"

You may remit in person at the Records Unit, Monday-Friday, from 7:00 a.m. to 5:00 p.m.

If you have any questions you can reach the Alarm Coordinator at 816-969-1719

YOU MUST BRING THIS COMPLETED PERMIT WITH YOU.

^{**} Applicant agrees that the City of Lee's Summit shall have no responsibility in rendering or not rendering any service or in termination of service in connection with any alarm or alarm system, any service being voluntary and solely for the benefit of applicant and at no expense to applicant.