

ALARM USER PERMIT APPLICATION

FOR THE LICENSE PERIOD BEGINNING **JANUARY 2023** ENDING **DECEMBER 2023**.

A. FULL NAME OF BUSINESS OR PREMISES WHERE ALARM IS INSTALLED:

PHONE: _____

B. MAILING ADDRESS:

C. NAME OF OWNER(S), PRESIDENT OR DIRECTOR(S):

1. _____ PHONE: _____

2. _____ PHONE: _____

D. COMPANY INSTALLING ALARM:

1. FIRM: _____

2. ADDRESS: _____

3. PHONE: _____

E. I WISH TO DISCONTINUE MY SERVICE.

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POLICE DEPARTMENT USE

RECEIVED: _____ DATE APPROVED: _____

BY: _____