ALARM USER PERMIT APPLICATION

FIRE ALARM PERMIT NUMBER_____

INTRUSION ALARM PERMIT NUMBER_____

PLEASE PRINT OR TYPE: DATE OF APPLICATION:_____

NAME OF BUSINESS OR RESIDENCE:_____

ADDRESS OF ALARM:_____PHONE NUMBER:_____

NAME OF ALARM COMPANY:_____

TYPE OF ALARM SYSTEM: AUDIBLE_____SILENT_____WARNING LIGHT_____

SMOKE_____HEAT____SPRINKLER SYSTEM____

THIS SYSTEM WILL DENOTE: INTRUSION_____ROBBERY_____FIRE_____PANIC_____

SHOULD THE POLICE OR FIRE DEPARTMENT NEED TO CONTACT A RESPONSIBLE PARTY ASSOCIATED WITH THE ALARM SYSTEM, THE FOLLOWING PERSONS WILL BE CALLED IN LISTED ORDER UNTIL CONTACT IS MADE:

	NAME	RELATIONSHIP TO ALARMED PREMISE	PHONE #
1.			
2.			
3.			

TYPE OF STRUCTURE: SINGLE FAMILY DWELLING_____APARTMENT___COMMERCIAL_____

SINGLE FLOOR_____MULTIPLE FLOOR_____ROOF ENTRY_____BASEMENT ENTRY_____

SPECIAL INSTRUCTIONS TO ASSIST OFFICERS OR FIRE PERSONNEL RESPOND/SEARCH YOUR PREMISES:_____
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*****PLEASE COMPLETE THIS APPLICATION AND RETURN IT TO THE ALARM COORDINATOR AT THE NORFOLK POLICE DIVISION, 202 N 7TH ST, NORFOLK, NE 68701, OR FAX 402-844-2160*****