

ALARM PERMIT APPLICATION

| Alarm Company: | | Alarm User Address: |
|---------------------|--|-------------------------|
| Address: | | Alarm User Name: |
| Contact Person: | | Alarm User Phone #: |
| Email: | | Alarm User Email: |
| Phone #: | | _ |
| LICENSE#: | EXP DATE: | - |
| Monitoring Compan | y: | - |
| Address: | | _ |
| Contact Phone #: | | - |
| LICENSE#: | EXP DATE: | _ |
| Please attach check | or money order made payable to: City | of Orlando Fee: \$15.00 |
| Mail payment to: | Orlando Police Department Fiscal Management P.O. Box 913 Orlando, FL 32802-0913 | |

Questions on this form must be answered before the permit will be issued. When payment is received and the application is approved, the Permit Number will be issued and sent to the mailing address indicated above. For questions or additional information call 321.235.5330

Alarm User self installations may disregard this section.

| Do all employees that sell, install, or service your alarm systems have the required BASA/FASA certification? | | | | | NO | |
|---|-----|----|-----------|----------------|----|--|
| Has the installer instructed the user in the proper procedures for the operation of the alarm system? | | | | | NO | |
| Has the installer instructed the user in the proper procedures when an alarm signal occurs? | | | | | NO | |
| Has the alarm user been given instruction on how to avoid false alarms? | | | | | NO | |
| Does the equipment installed meet current ANSI or UL requirements? | | | | | NO | |
| If you answered "no" to any of these questions please explain: | | | | | | |
| | | | | | | |
| do not write below this line | | | | | | |
| FAC USE ONLY | | | | | | |
| Application Approved? | Yes | No | | Date approved: | | |
| Notification Sent? | Yes | No | Permit #: | Date issued: | // | |