THE CITY OF																Please type or print in BLOCK CAPITAL LETTERS											
EULESS		P.O. BOX 143128, Irving, TX 75014, Phone: 1-888-387-7034 ALARM PERMIT APPLICATION																the b		LKO							
	Т	he C	City o	f Eu	less	Alar											M Co	orpo	ratio	n							
(Please print)		Sen	ior C	Citize	en (6	5 or	Old	er)																			
Type of Alarm:		Residential Business Govt. Entity												_			_		В	urgla	ry 🕻] R	lobb	ery/P	anic		
Name of Registration Holde	er:																										
Business Name:																											
Name of responsible party:																											
Alarm Location: (Include Building/Apt #) (Include Suite or Unit #) City:																	State:				1	Zip:					
Billing Address: (if different)																											
City:																	State:]	Zip:					
Enroll to Go Paperless:		(If en	rolled,	you o	pt for (email	notifica	ations	and y	ou will	no lor	nger re	eceive	notific	ations	by US	- SPS. If	not e	nrolle	d, you	agree	to rec	eive	notific	ations	by US	PS.)
Email Address: (If enrolled to Go Paperless, valid email address is mandatory.)							Ļ																				
Home Phone:				IL										Cell	Pho	ne:											
Office Phone:				$ \Gamma$																							
EMERGENCY CONTACTS							_																				
Name:																											
Phone #1:					Τ	Τ]		Pho	ne #	2:					T	T	Ī				
Name:																											
Phone #1:				١Г										Pho	ne #	2:				Γ	Τ						
SPECIAL CONDITIONS In order to ensure the safety of our circumstances (i.e. guard animals, I						le the	Eules	ss Pol	lice De	epartr	nent t	o bett	er pro	otect y	our pi	ropert	y, plea	ase p	rovide	e infor	matio	n rega	arding	g pote	entially	haza	dous
Comment:			Γ	Γ										Γ					Γ				Γ	Τ	Τ		\square
LALARM INSTALLATION D	ETAIL	s	-	-	-	-	-	-	-	-		-	-	-	-		-		-	-	-	-	-	-	-	-	
Alarm Installation Date:			/			/							Phone #														
Alarm Installation Company	r:																										
Address:																											
Monitoring Company: (if different)																											
Address:																											
Phone #:				Γ	T	T	T					1												<u> </u>			
PLEASE READ THE FOLLOWING AND. This is to certify that as the applying print the event that the alarm system is accide alarms. The Police response may be influ	cipal, my ii entally acti	vated,	l also a	ackno	wledge	e that t	the inst	allatio	n com	bany le	eft me a	a set o	f writte	en instr	uctions	s for th	e alarr	n syst	em, in	cludin	g writte	en guid	elines				
Signature: (Owner)																	Date						/				
In accordance with the City of Euless, TX for an alarm registration/renewal is set for each, 6th to 8th false alarm \$75.00, each 8th and above false alarm \$100.00 each.	th below a 9th and at	nd sha oove fa	all be pa Ilse alar	aid by rm \$10	the ala 00.00 e	irm use each. F	er. For or Res	Reside identia	ential a II and (nd Cor Comme	nmerci ercial a	ial aları	m syst	em per	mit for	Burgla	ry aları	n 1st	to 3rd	false a	alarm h	as no i	fine, 4	th to 51	th false	alarm	is \$50.00

Registration & Renewal Fees:

For Customer Service Call: 1-888-387-7034 Mail this form and payment to: City Of Euless, TX Alarm Permit Program P.O. BOX 143128, IRVING, TX 75014