CITY OF GLADEWATER ALARM DETAIL 511 S. Tyler Gladewater, TX 75647 903.845.2166



## ALARM SYSTEM PERMIT APPLICATION

## PERMIT MUST BE ISSUED BEFORE ALARM SYSTEM IS ACTIVATED TO AVOID FEES AND/OR FINES

All incomplete / illegible applications will not be processed and will be returned.

LOCATION INFORMATION  NAME OF PERSON OR BUSINESS:					
ADDRESS:					
(Where alarm system will be operated)			Apt/Condo/Suite	# City	Zip Code
E-MAIL ADDRESS:					
MAILING / BILLING ADDRESS:					
(If different than above address) Stree	et Address / PO Box		Apt/Condo/Suite	# City	Zip Code
TELEPHONE NUMBERS: Home ()		Work (		Mobile ()	
TYPE OF LOCATION: HOUSE	APT	_BUSINESS _	OTHER		
ARE THERE DANGEROUS OR SPECIAL	CONDITIONS PR	ESENT AT THIS	ALARM SITE?	NO 🗆 YES	
(IF YOU ANSWERED "YES" YOU ARE REQUES OR SPECIAL CONDITIONS FOR THE SAFETY O			A DETAILED STATEMEN	T OF THE NATURE	OF THE DANGEROUS
ALARM MONITORING COMPANY:					n.
ALARM COMPANY TELEPHONE NUM	IBEK: ( <u>)</u>	A	ARIVI COIVIPAINT LI	CENSE NUIVIDE	K:
Type of Alarm System Permit you a	are applying for:	check only on	e box)		
☐ SECURITY ALARM ONLY	☐ FIRE ALARM	ONLY [	SECURITY & FIRE	EALARM	
PERMIT APPLICANT: (Individual Makname:  CONTACTS: Please list two (2) LOCAL emerge	DRIVERS LIC				
respond WITHIN ONE (1) HOUR to grant acc	•				-
NAME OF CONTACT #1:		Home #:		Other #:	
NAME OF CONTACT #2:		Home #: _		Other #:	
The Applicant/Intended Permit Holder acknowledge and the Gladewater or the Gladewater Police Depart The Applicant/Intended Permit Holder affirm knowledge. This application may be denied,	tment may be given to ns they have read thi , or permit revoked, t	to the applicant's s application, and for false or mislea	alarm company for the parthat all information her ding information, and the	purpose of the rec rein is true and con nat the Applicant,	uction of false alarms.
intended permit holder, certifies herein that	they are authorized	to act on behalf o	f the intended permit h	older.	
The Applicant/Intended Permit Holder agree specified on this application) and accepts resaid ordinance.					
THE APPLICANT/INTENDED PERMIT HOLDER IN THIS APPLICATION, AS WELL AS, THE TER				TOOD THE INFORI	MATION CONTAINED
APPLICANT SIGNTURE:			DA <sup>-</sup>	TE:/_	/