



City of Boca Raton Police Alarm Permit Form

PERMIT EXPIRES:
January 1, 2012

Permit#

PLEASE TYPE OR PRINT

COMMERICAL

RESIDENTIAL

| |
|------------------------|
| ALARM USER NAME |
| ADDRESS OF ALARM |
| PHONE # |

| |
|----------------------------|
| BILLING INFORMATION |
| ADDRESS OF ALARM |
| PHONE # |
| BILLING CONTACT |

INDIVIDUALS ABLE AND AUTHORIZED TO ENTER PREMISES AND DEACTIVATE THE ALARM

| LAST NAME | FIRST NAME | PHONE NUMBER |
|-----------|------------|--------------|
| | | |
| | | |
| | | |

| ALARM MONITORING COMPANY | ALARM SERVICING COMPANY |
|--------------------------|-------------------------|
| NAME | NAME |
| ADDRESS | ADDRESS |
| CITY/STATE/ZIP | CITY/STATE/ZIP |

I certify that I understand and agree to the provision of the City of Boca Raton Code Ordinance 5074

Signature of Applicant

Name -Property Owner (if Tenant)

VIDEO ENHANCED EQUIPMENT YES NO

PLEASE COMPLETE FORM & RETURN TO CITY OF BOCA RATON

Please return completed form to: Alarm Billing Unit
201 West Palmetto Park Road
Boca Raton FL 33432