RESIDENTIAL ALARM PERMIT APPLICATION & RENEWAL

City of Carrollton – Alarm Permit
CITY HALL – 1ST FLOOR
1945 E. Jackson Rd., Carrollton, Texas 75006
(972) 466-3525 ALARM PERMIT FAX# 972-466-3132

PLEASE COMPLETE ALL INFORMATION

MAIL TO:

City of Carrollton – ALARM PERMITS P.O. BOX 115125 CARROLLTON, TX 75011-5125

BILLING INFORMATION:

LAST NAME	FIRST NAME	ALARM SITE ADDRESS		APT#
HOME #	CELL #:	CELL #: WORK #:		
EMAIL ADDRESS:				
OTHER ADULT IN HOM	ME:			
Last Name:		/First Name		
CELL #:	WORK #:	WORK #:EMAIL ADDRESS:		
Billing Name & Addres	ss (If different)			
Last Name:		/First Name		
Billing address				
Circle Alarm Type: B	Burglary R obbery l	Fire Medical Emergency	Water Flow	On-Site Audible
Residential Permits: Nev	w Permit = \$50 Renewa	al = \$25		
Alarm monitoring servicePhone#_				
CONTACTS FOR ALAR	RM SITE – Minimum of 2	2 local contacts NOT living in	the home MUST	be provided
CONTACT	WORK	НОМЕ	CELL	
NAME	TELEPHONE #	TELEPHONE #	TEI	LEPHONE #
DOGS ON PREMISE? You	es No If yes, when	re?		
	•	otional question)		
HAZARDS ON PREMISE	2: Please provide details on h	azards in the premise of which a re	esponding officer sh	ould be aware.
DED. 47				
PERMIT NO.	Date Issued:	Date Expired:		