

**ARLINGTON POLICE DEPARTMENT
COMMERCIAL BURGLAR ALARM PERMIT APPLICATION**

“Information contained in alarm systems records maintained by a governmental body that concerns the location of an alarm system, the name of the occupant of an alarm system location, or the type of alarm system used is confidential and may be disclosed only to the board or as otherwise required by state law or court order.” Section 1702.284, Tx. Occupations Code

| CHECK ALL APPLICABLE BOXES | | | |
|---|----------|---------------------------------------|---|
| New Permit <input type="checkbox"/> | | Renewal <input type="checkbox"/> | |
| Permit for: Corporation <input type="checkbox"/> | | Partnership <input type="checkbox"/> | Individual <input type="checkbox"/> |
| Other(specify) <input type="checkbox"/> | | | |
| Type Alarms: Commercial <input type="checkbox"/> | | Multi Family <input type="checkbox"/> | Other(specify) <input type="checkbox"/> |
| COMPLETE FOLLOWING INFORMATION | | | |
| Address to be permitted: | | | |
| | | | Zip Code: |
| Name of Business: | | | Phone # |
| List three persons police may contact in case of emergency (after hours): Applicant agrees to keep list current and notify Police of changes. | | | |
| 1. | | Phone () | |
| 2. | | Phone () | |
| 3. | | Phone () | |
| Complete Billing Address(if different from site): | | | |
| | | | Zip Code: |
| Attention Name or Dept. Name | | Billing Phone # | |
| Name of Corporation/Partnership or Individual: | | | |
| If Corporation, Place Incorporated: | | | Date Incorporated: |
| Principal Place of Business Address: | | | |
| | | | Zip Code: |
| If Corporation, list officer’s names, position, home and business address: | | | |
| Officer | Position | Residence Address | Business Address |
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PLEASE SEE OTHER SIDE

