

CITY OF HIGHLAND VILLAGE ALARM PROGRAM

P.O. Box 142376, Irving, TX 75014, Phone: (888)-563-0378

Alarm Registration/Permit Application

BLOCK CAPITAL LETTERS clearly inside the box.

(Please print)

Please type or print in

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Name of Registration Holder:						Ш																					
Business Name:																											
Name of responsible party:																											
Alarm Location: (Include Building/Apt #) (Include Suite or Unit #)																											
City:						Ш											Sta	ate:				Zip:					
Billing Address: (if different)																											
City:																	Sta	ate:] :	Zip:					
Enroll to Go Paperless:		(If enro	olled, y	ou op	t for e	mail n	otifica	tions a	and you	u will r	no lon	ger re	ceive	notifica	ations	by US	PS. If	not er	nrolled	, you	agree	to rec	eive r	otifica	tions b	y USF	PS.)
Email Address: (If enrolled to Go Paperless,																											
valid email address is mandatory.) Home Phone:						T	\Box						Cell Phone:														
Office Phone:	一				Ī	T	٦i									•										_	
EMERGENCY CONTACTS																											
Name:																											
Phone #1:														Pho	ne #	2:											
Name:																											
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SPECIAL CONDITIONS In order to ensure the safety of our officers, the public and to enable the City of Highland Village Police Department to better protect your property, please provide information regarding potentially hazardous circumstances (i.e. guard animals, weapons, hazardous substances, etc.)															9												
Comment:																											
ALARM INSTALLATION DET	AILS	3	_																								
Alarm Installation Date:			/			/																					
Alarm Installation Company:																											
Monitoring Company:																											
(if different)						ш										ш			ш						ш		
PLEASE READ THE FOLLOWING AN This is to certify that as the applying pr and practices to follow in the event tha including written guidelines on how to a conditions, emergency conditions and	incipa t the a avoid	ıl, my alarm false	syste alarm	m is a	ccide	ntally	activa	ated,	also	ackno	owled	ge tha	at the	instal	lation	comp	any l	eft me	e a se	t of w	ritten	instru	uction	s for t	he ala	ırm sy	
Signature: (Owner)																	Date	э: 🗌					7				

In accordance with the Ordinance of City of Highland Village, TX, Chapter 6 Article 6.05 "Alarm Systems", if you have an active alarm system in the City of Highland Village, Texas, it must be registered with the City for an annual fee listed below:

Registration: a) Residential: \$30 b) Commercial: \$50

a) Residential : \$30, In case of excessive false alarms (8 or more) within the preceding 12 month period: \$50 b) Commercial: \$50, In case of excessive false alarms (8 or more) within the preceding 12 month period: \$70

For Customer Service Call: 1-888-563-0378 Mail this form and payment to: City of Highland Village Alarm Program P.O. Box 142376, Irving, TX 75014