

CITY OF ODESSA

P.O. Box 141326, Irving, TX 75014, Phone: 1-888-250-3164

Please type or print in BLOCK CAPITAL LETTERS clearly inside the box.

ALARM PERMIT APPLICATION

(Please print)		RESIDENTIAL BUSINESS GOVT. ENTITY													Burglary Robbery/Panic												
Name of Registration Holder:																											
Business Name:																											
Name of responsible party:																											
Alarm Location: (Include Building/Apt #) (Include Suite or Unit #)																	St	ate:			-	Zip:					=
City: Billing Address: (if different)							_				_	_						J. (0.	\dashv			p. [=
City:			一														Sta	ate:			Z	Zip:			一		
Enroll to Go Paperless:		If enro	olled, yo	ou op	t for e	mail no	otificat	tions a	and you	u will r	io long	ger rec	eive r	notifica	ations	by US	PS. If	not er	ırolled,	you a	agree t	to rece	ive n	otificat	ions b	y USF	PS.)
Email Address: (If enrolled to Go Paperless, valid email address is mandatory.)																\Box											
Home Phone:														Cell	Pho	ne:							floor				
Office Phone:	П		司	Г	T	T	٦i									_											
EMERGENCY CONTACTS	닏			L																							
Name:																											
Phone #1:						Ī								Pho	ne #	2:					Ī	Ī					
Name:																											
Phone #1:														Pho	ne #	2:] [
SPECIAL CONDITIONS In order to ensure the safety of our officers, the public and to enable the City of Odessa Police Department to better protect your property, please provide information regarding potentially hazardous circumstances (i.e. guard animals, weapons, hazardous substances, etc.)															у												
Comment:	上		Ш																				<u></u>		Ш		Ш
ALARM INSTALLATION DET	AILS	· ·		_	_		_	_	_	_																	
Alarm Installation Date:	\bigsqcup		<u> </u>			<u> </u>	\perp	\perp	\perp																		
Alarm Installation Company:																											
Monitoring Company:																									\Box		
(if different)	ш	ш							Ш	_									Щ						_		
PLEASE READ THE FOLLOWING AN This is to certify that as the applying pri and practices to follow in the event that including written guidelines on how to a conditions, emergency conditions and s	incipa t the a avoid f	l, my i larm s alse a	systen alarms	ı is a	ccide	ntally	activa	ated,	lalso	ackno	wled	ge tha	t the	instal	lation	comp	any l	eft me	a set	of w	ritten i	instru	ctions	s for th	ne ala	rm sy	
Signature: (Owner)														_			Date	e: [_] /			/				

In accordance with the City of Odessa, TX, Ordinance # 93-70, Article 4-13 "ALARM SYSTEMS", if you have an active alarm system in the City of Odessa, Texas, it must be registered with the City for an annual fee listed below:

Registration: a) Residential : \$20 b) Commercial : \$25

Renewal:

a) Residential : \$15 b) Commercial : \$20

For Customer Service Call: 1-888-250-3164
Mail this form and payment to:
City of Odessa Alarm Program
P.O. Box 141326, Irving, TX 75014