CITY POLICE PALATKA, FLORIDA

Permit Registration

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

Type of Alarm: ☐ Residential ☐ Commercial ☐ Govermental Permit #:

Type of System: ☐ Burglary ☐ Robbery ☐ Panic Date: / /

Permit Holder Information

Permit Holder Name:

Physical Address: Apt/Bldg/Suite:

City: State: Zip:

First Phone: Second Phone:

Mailing Address:
(if different)

City: State: Zip:

Enroll to Go Paperless: ☐ (If enrolled, you opt for email notifications and you will no longer receive notifications by USPS. If not enrolled, you agree to receive notifications by USPS.)

Email Address:
(If enrolled to Go Paperless, valid email address is mandatory.)

Hazardous materials, animals:

List below two local contacts that can assist emergency personnel.

First Contact Name:

Address:

First Phone: Second Phone:

Second Contact Name:

Address:

First Phone: Second Phone:

Contractor and Monitoring Company Information

Contractor/ Servicing Company:

Mailing Address:

City: State: Zip:

Telephone:

Monitoring Business Name:

Phone Number: Date of Installation/Takeover: / /

Date of Conversion: / /

Annual Permit fee is $25.00 payable to City of Palatka.
Mailing address: City of Palatka Alarm Program, P.O Box 140517, Irving, TX 75014-0517.

For additional information or assistance in completing this permit application, please contact the False Alarm Reduction Program at 1-877-874-6002.

Applicant Signature: Date Signed: / /

Please notify the False Alarm Reduction Program if you have any changes in status. **PPD Form 0076**