



CITY OF PEMBROKE PINES

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

ALARM REGISTRATION APPLICATION

(Please print)

Type of Alarm:

Residential Business

Name of Registration Holder:

[Grid for Name of Registration Holder]

Business Name:

[Grid for Business Name]

Name of responsible party: (If different)

[Grid for Name of responsible party]

Alarm Location: (Include Building/Apt #) (Include Suite or Unit #)

[Grid for Alarm Location]

City:

[Grid for City, State, Zip]

Billing Address: (if different)

[Grid for Billing Address]

City:

[Grid for City, State, Zip]

Enroll to Go Paperless:

[Enroll checkbox and text]

Email Address:

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

[Grid for Email Address]

Home Phone:

[Grid for Home Phone]

Cell Phone:

[Grid for Cell Phone]

Office Phone:

[Grid for Office Phone]

EMERGENCY CONTACTS

Name:

[Grid for Name]

Phone #1:

[Grid for Phone #1]

Phone #2:

[Grid for Phone #2]

Name:

[Grid for Name]

Phone #1:

[Grid for Phone #1]

Phone #2:

[Grid for Phone #2]

SPECIAL CONDITIONS

In order to ensure the safety of our officers, the public and to enable the Pembroke Pines Police Department to better protect your property, please provide information regarding potentially hazardous circumstances (i.e. guard animals, hazardous substances, etc.)

Comment:

[Grid for Comment]

ALARM INSTALLATION DETAILS

Alarm Installation Date: (If Known)

[Grid for Alarm Installation Date]

Alarm Company Phone #:

[Grid for Alarm Company Phone #]

Alarm Installation Company:

[Grid for Alarm Installation Company]

Address:

[Grid for Address]

Monitoring Company: (if different)

[Grid for Monitoring Company]

Address:

[Grid for Address]

Phone #:

[Grid for Phone #]

"I do hereby solemnly swear that the above listed information is correct to the best of my knowledge."

Signature: (Owner)

[Signature line]

Date:

[Grid for Date]

"In accordance with the City of Pembroke Pines Code of Ordinance 134.05 Police False Alarms, if you have an alarm system in the City it must be registered. First false alarm No fine, second false alarm Warning notice will be issued and third false alarm or more is \$100.00 each. Civil Penalty for non-registration: \$50."

For Customer Service Call: 1-877-484-7717
Mail this form to:
Pembroke Pines False Alarm Reduction Program
Attn: Enforcement Programs Manager
9500 Pines Boulevard
Pembroke Pines, FL 33024