

Alarm Company Business Application

Type of Business : (Please check all applicable) Alarm Installation Company \_\_\_\_\_

Monitoring Company \_\_\_\_\_

If Alarm Company: (Please fill out section below)	If Monitoring Company: (Please fill out section below)
Alarm Company Name	Monitoring Company Name
Address of Alarm Company	Address of Monitoring Company
City, State and Zip Code	City, State and Zip Code
Billing Address (if different)	Billing Address (if different)
Business Phone: Alt. Phone:	Business Phone: Alt. Phone:
Monitoring Companies Utilized:	Affiliated Alarm Companies:
	( If more space is needed, please attach list)
Alarm Response Manager Name:	Business Phone:

Alarm Response Manager Email:

Date:

Each alarm installation company and alarm monitoring company must designate one individual as the Alarm Response Manager(ARM) for the company. The ARM must be knowledgeable of the City of Durham Code and have authority to deal with false alarm issues and respond to requests from the alarm administrator.

In accordance with City of Durham, every alarm installation company and every alarm monitoring company shall obtain a City of Durham alarm company business registration.

Return this form to: City of Durham Alarm Program P.O. Box 141625 Irving, Tx 75014 https://www.famspermit.com/Durham For Customer Service Call: 1-888-535-5797

For Office Use Only	
Registration Number:	
Date Received:	
Expiration Date:	