



INC. VILLAGE OF FLORAL PARK
INC. VILLAGE OF FLORAL PARK, PO BOX 141536, IRVING, TX 75014, Phone (877) 654-3282

ALARM PERMIT APPLICATION

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

Please Print

Type of Alarm:

- Residential Business
- Burglar Hold Up/Panic Alarm Fire /Medical Alert
- New License (Residential) \$50.00 Renewal (Residential) \$25.00 Update Info
- New License (Business) \$100.00 Renewal (Business) \$50.00 Update Info

Name of Resident:

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Business Name:

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Location of Alarm Address:

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City:

	State: <input type="text"/>	Zip: <input type="text"/>
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Billing/Mailing Address (if different):

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City:

	State: <input type="text"/>	Zip: <input type="text"/>
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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.)

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INDICATE HOW THE POLICE DEPT IS NOTIFIED OF THE ALARM:

Alarm Company notifies Police.

Alarm Company Name:

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IMPORTANT: Please notify alarm company of your alarm number

DOGS ON PREMISES:

Yes No Where?

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Home Owner Information/Business Information:

Name:

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Work Phone:

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Cell Phone:

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Home Phone:

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Contacts: (The Police will contact the below listed contacts if you are not located.)

1. Name:

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Address:

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City:

	State: <input type="text"/>	Zip: <input type="text"/>
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Home Number:

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Work Number:

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2. Name:

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Address:

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City:

	State: <input type="text"/>	Zip: <input type="text"/>
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Home Number:

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Work Number:

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Date: / /

Signature: (Owner)

**PLEASE MAKE CHECK OR MONEYORDER PAYABLE TO : INC. VILLAGE OF FLORAL PARK
THE ENTIRE FORM MUST BE FILLED OUT**