# COPPELL POLICE DEPARTMENT

CITY OF COPPELL --- PO BOX 140545 --- IRVING, TX. 75014 --- (877)-874-6884

**ALARM PERMIT APPLICATION**

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

☐ New License (Residential) $30.00 ☐ Renewal (Residential) $20.00 ☐ Update Info

☐ New License (Business) $50.00 ☐ Renewal (Business) $50.00 ☐ Update Info

Ownership Type (if Commercial): ☐ Franchise ☐ Corporate Owned

Name of Resident:

Business Name:

Location of Alarm Address:

City: State: Zip:

Billing/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.)

Type of Alarm: ☐ Burglary (Break-in) ☐ *Robbery (Hold-up Bus. Only)

*Robbery Alarm on: Day(s): Hrs.

**INDICATE HOW THE POLICE DEPT IS NOTIFIED OF THE ALARM:**

☐ Alarm Company notifies Police.

Alarm Company Name:

**IMPORTANT: Please notify alarm company of your alarm number**

DOGS ON PREMISES: ☐ Yes ☐ No Where?

Home Owner Information/Business Information:

Name:

Work Phone: Cell Phone:

Home Phone:

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

1. Name:

Address:

City: State: Zip:

Home Number: Work Number:

2. Name:

Address:

City: State: Zip:

Home Number: Work Number:

I HEREBY CERTIFY THAT I AM THE OWNER OR DESIGNATED AGENT FOR THE OWNER OF THE ALARM SITE SHOWN ABOVE AND THAT THE INFORMATION IS TRUE AND CORRECT. I UNDERSTAND THAT I WILL BE LIABLE FOR ALL EXPENSES INCURRED BY THE CITY IN DISABLING THE ALARM IF THE SYSTEM EMITS AN AUDIBLE SIGNAL FOR LONGER THEN THIRTY (30) MINUTES. I ALSO UNDERSTAND THAT THE GRANTING OF A LICENSE UNDER ORDINANCE 87-381, WHICH PERTAINS TO THE LICENSING OF ALARM SYSTEMS, SHALL NOT BE CONSTRUED AS AN ENDORSEMENT OF THE LICENSED ALARM SYSTEM. GRANTING OF A LICENSE ONLY AUTHORIZES THE INSTALLATION AND OPERATION OF AN ALARM. ALARM CAPABILITIES SHOULD BE ACCESSED BY AN ALARM COMPANY CAPABLE OF PERFORMING SUCH SERVICES. LICENSING FEE SHOULD ACCOMPANY PERMIT APPLICATION.

_____
Signature: (Owner)

Date: / /

**PLEASE MAKE CHECK OR MONEYORDER PAYABLE TO : THE CITY OF COPPELL, THE ENTIRE FORM MUST BE FILLED OUT**