



# ALARM USER REGISTRATION APPLICATION

CITY OF CORAL GABLES, FLORIDA  
FINANCE DEPARTMENT - COLLECTION DIVISION  
405 BILTMORE WAY  
CORAL GABLES, FLORIDA 33134  
(305) 460-5280

Ordinance No. 2427 requires that every person, installing or causing to be installed, using, maintaining, or possessing an alarm system on premises owned, or in possession or control of such premises within the City of Coral Gables register that system.

Complete information needed below and return with payment of **\$26.00** (\$25.00 Registration Fee, \$1.00 Document Filing Fee), to the City of Coral Gables. Mail to Chief Collector, P.O. Box 141549, Coral Gables, Florida 33114.

**EXPEDITE PROCESSING OF YOUR APPLICATION, KINDLY ANSWER ALL QUESTIONS.**

### PLEASE PRINT

PROPERTY ADDRESS OF RESIDENCE OR BUSINESS	APT. OR SUITE NO.	ZIP CODE
NAME OF RESIDENT OR BUSINESS	HOME PHONE	BUSINESS PHONE
OWNER OF PROPERTY (IF NOT SAME AS ABOVE)	ADDRESS	PHONE
ALARM INSTALLED BY	ADDRESS	PHONE
ALARM MONITORING COMPANY	ADDRESS	PHONE
MAINTENANCE COMPANY-IF MONITOR = MAINTENANCE WRITE <u>SAME</u>	ADDRESS	PHONE

### EMERGENCY NOTIFICATION

Name, address and telephone number of persons not residing at property address who can be reached in an emergency to shut off alarm:

NAME	ADDRESS	DAY	NIGHT
		PHONE	/
NAME	ADDRESS	DAY	NIGHT
		PHONE	/

Signature: \_\_\_\_\_  
(OWNER, TENANT, RESIDENT AGENT/MANAGER) DATE \_\_\_\_\_

Please print name: \_\_\_\_\_

FAILURE TO SEND IN COMPLETED APPLICATION ALONG WITH \$26.00 WITHIN 10 DAYS, CAN RESULT IN A \$50.00 PENALTY AS WELL AS A \$200.00 CHARGE FOR EACH ACTIVATED ALARM.

THE ORDINANCE MANDATES THAT ANY CHANGE OF THE INFORMATION GIVEN IN THIS APPLICATION BE REPORTED IN WRITING TO THE CHIEF COLLECTOR WITHIN 15 DAYS.

NOTE: THE CITY WILL DISCONNECT A NUISANCE ALARM (ALARM SOUNDING MORE THAN 15 MINUTES) AFTER MAKING REASONABLE EFFORT TO CONTACT PERSONS AUTHORIZED TO DEACTIVATE ALARM. COSTS INCURRED IN THE DEACTIVATION OF ALARM AND SECURING OF PREMISES, WILL BE PAID BY ALARM USER OR OWNER OF PROPERTY.