



IRCSO - False Alarm Reduction Office
4055 41st Avenue
Vero Beach, FL 32960

ALL INFORMATION MUST BE TYPED OR PRINTED. PLEASE RETURN THE COMPLETED FORM, ALONG WITH \$30.00 REGISTRATION RENEWAL FEE. MAKE CHECKS PAYABLE TO IRC SO-FARO AND MAIL TO: FALSE ALARM REDUCTION OFFICE 4055 41ST AVENUE, VERO BEACH, FLORIDA 32960-1808 (MAILING ADDRESS).

CONNECT: ___ LOCAL ___ REMOTE SOUND: ___ SILENT ___ AUDIBLE
 RESET: ___ MANUAL ___ AUTOMATIC INSTALLED: EXPIRES:
 ALARM TYPE: ___ Burglar Holdup ___ Other Panic ___ Silent

LOCATION -		RESPONSIBLE PARTY	
NAME (LAST, FIRST OR BUSINESS NAME)		LAST, FIRST	
STR # STREET NAME APT./SUITE	eMAIL ADDRESS	STR # STREET NAME APT./SUITE	eMAIL ADDRESS
CITY, STATE ZIP		CITY, STATE ZIP	
Ph1	Ph2	Ph1	Ph2
PHONE 1	PHONE 2	PHONE 1-2	

CONTACT PERSON 1		CONTACT PERSON 2	
NAME (LAST, FIRST)		NAME (LAST, FIRST)	
Ph1		Ph1	
Ph2		Ph2	
PHONE 1-2		PHONE 1-2	

SPECIAL CONDITIONS

MONITORED BY		INSTALLED BY	
COMPANY NAME		COMPANY NAME	
ADDRESS (STR # STREET NAME APT./SUITE)		ADDRESS (STR # STREET NAME APT./SUITE)	
CITY, STATE ZIP		CITY, STATE ZIP	
PHONE 1	PHONE 2	PHONE 1	PHONE 2

I hereby agree to comply with all the requirements of this ordinance. I understand that I am responsible for all fines for excessive False alarms.

Signature _____

Date _____

IRCSO- FARO OFFICE LOCATION: INDIAN RIVER COUNTY SHERIFF'S SUBSTATION AT THE INDIAN RIVER MALL, SUITE #860 ENTRANCE #3. PHONE #'S: (772) 978-6042 OR (772) 978-6043 FAX # (772) 794-0313

PERMIT RENEWALS - REVIEW THE INFORMATION. IF THERE ARE NO CHANGES, THEN RETAIN THIS COPY FOR YOUR RECORDS.



**Indian River County Sheriff's Office
False Alarm Reduction Staff
4055 41st Avenue
Vero Beach, Florida 32960**

INDIAN RIVER COUNTY ALARM SUBSCRIBER / ALARM COMPANY INFORMATION FORM

Please use ink and print clearly or type

FOR: Name of Residence/Business: _____
(This will be the same name & address the alarm company will use for dispatch)

Address of Alarm Location: _____

Date of Alarm Installation: _____ Alarm Business License Number: _____

After you have read and clearly understand the statements listed below, please initial each item:

1. The Alarm Company has provided the subscriber with an Owner's Manual and/or Video Tape on the operation of this alarm system. Subscriber understands operation of the keypad or the arming/disarming device, contacts, space detection, central station procedures and cancellation procedures. Subscriber understands that it is their responsibility to train **ALL** persons who have access to the armed premises on the items listed above. The Alarm Company has explained common reasons for false alarms, ways to prevent them and the importance of preventing false alarms.

ALARM CO. _____ SUBSCRIBER _____

2. The Alarm Company has provided the Subscriber with Indian River County Sheriff's Office False Alarm Packet containing:

- A. Alarm Subscriber Permit Application
- B. Indian River County Sheriff's Office False Alarm Reduction Flyer

IT IS THE SUBSCRIBER'S RESPONSIBILITY TO READ THIS PACKET.

ALARM CO. _____ SUBSCRIBER _____

3. The Alarm Company has informed the Subscriber that the Alarm Subscriber Permit Application must be submitted (along with the permit fee) to the Indian River County Sheriff's Office within 15 calendar days of installation/takeover.

ALARM CO. _____ SUBSCRIBER _____

4. The Alarm Company will submit the initial Alarm Subscriber Permit Application and fee.

ALARM CO. _____ SUBSCRIBER _____

5. The subscriber is responsible for all renewal and update information.

ALARM CO. _____ SUBSCRIBER _____

6. The Alarm Company has informed the Subscriber about the responsible representative requirement of the Indian River County Ordinance. Subscriber understands that a representative must respond within one hour of the alarm activation to: 1. deactivate the system; 2. provide access to the premises; 3. or to provide security.

ALARM CO. _____ SUBSCRIBER _____

7. The Alarm Company has informed the Subscriber about Section 2 (K); Section 4; Section 12 and Section 13.

IT IS THE SUBSCRIBER'S RESPONSIBILITY TO READ THESE SECTIONS ABOUT FALSE ALARMS, PERMIT DURATION, FINES, AND THE APPEALS PROCESS.

ALARM CO. _____ SUBSCRIBER _____

Printed Name of Alarm Company Representative

Printed Name of Subscriber

Signature of Alarm Company Representative

Signature of Subscriber

Name of Alarm Company

Today's Date

White - FARO

Yellow - Alarm User

Pink - Alarm Company