



City of Manteca
MANTECA POLICE DEPARTMENT
1001 W. Center Street
Manteca-CA 95337
(209) 456-8108

ALARM PERMIT

(Type or Print)

1) **LOCATION OF ALARM:** _____
Street Address Apt. or Ste.
(Check Mark one) () Home () Work () Business Phone No.: () _____
Cell Phone No. () _____

2) **NAME OF HOMEOWNER, BUSINESS, OR TENANT LOCATED AT THE ABOVE ADDRESS:**

Applicant's Name: _____
Applicant's Signature: _____ Date: _____
(Check Mark one) () Home () Work () Business Phone No.: () _____
Cell Phone No. () _____

ALARM INFORMATION

(Check Mark) () Audible Alarm () Silent Alarm Business No.: () _____

Name of Company Monitoring Alarm: _____

Address City Zip Code

EMERGENCY CALL LIST

These persons **MUST** have a key to the property and **MUST** be able to respond and secure the alarm within twenty (20)-minutes. A minimum of TWO (2) names **MUST** be listed—*do not include yourself.*

1) _____
First Name Last Name

Address City Zip Code
Cell No. () _____ (Circle) Work or Home: () _____

2) _____
First Name Last Name

Address City Zip Code
Cell No. () _____ (Circle) Work or Home: () _____

COMPLETE AND RETURN TO THE MANTECA POLICE DEPARTMENT
Mail to the above address or Fax to (209) 923-8938