



CITY OF PLACENTIA

401 E. Chapman Ave.
Placentia, CA 92870
(714) 993-8267 Telephone

Alarm Permit Fee:
\$50.00 for Residential
\$50.00 for Commercial

Renewal Fee:
\$25.00 every 2 years

TYPE OF APPLICATION: NEW RENEWAL UPDATE

TYPE OF PREMISE: COMMERCIAL RESIDENTIAL

Permit Nbr: _____

Permit Expires: _____

I. Alarm Owner Information:

Premise Address: _____ Unit #: _____

Business Name (if applicable): _____

Permittee's Name:
(Resident or Owner's Name) _____

Telephone: () _____

Billing Address (if different from above): _____

City: _____ State: _____ Zip: _____

II. Alarm Company Information:

Is the alarm monitored by an alarm company? If "yes", complete the following. If "no", go to Section III. Yes No

Company: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone: Business: () _____ Dispatch / False Alarm: () _____

III. Alarm Specifications (check all that apply):

Functions: Intrusion / Burglary Fire Medical Aid Robbery / Panic Other _____

Type: Audible Silent

Automatic Shut-Off / Reset: _____ Time (in minutes)

Back-up Power Supply: _____ Duration (in hours)

IV. Emergency Contact (list in order of call out):

1. Name: _____ Relationship: _____

Travel Time (in minutes): _____ Keys: Yes No

Address: _____

City: _____ State: _____ Zip: _____

Telephone: Home: () _____ Work: () _____ Cell: () _____

2. Name: _____ Relationship: _____

Travel Time (in minutes): _____ Keys: Yes No

Address: _____

City: _____ State: _____ Zip: _____

Telephone: Home: () _____ Work: () _____ Cell: () _____

V. Agreement:

I/We agree to comply with Chapter 10.38 of the Placentia Municipal Code, governing burglary, robbery, and fire alarm systems.

Alarm Owner Signature _____ Date _____

Approval: _____
Police Chief or Authorized Representative _____ Date _____

FOR OFFICE USE ONLY	Date Received:	Received By:	Fee Amount Paid:	Check: <input type="checkbox"/> # _____
	Date Entered:	Entered By:	Date to Finance:	Cash: <input type="checkbox"/>