



CITY OF UNION CITY
POLICE DEPARTMENT

Date of Expiration
Alarm Permit Number
Date Issued
Amount Paid
New Renewal Change
PDF/A Number

Please mail application to:

Union City Police Department
Attn: Alarm Officer
34009 Alvarado - Niles Road
Union City, Ca. 94587

CITY OF UNION CITY ALARM PERMIT APPLICATION

- 1. Name of Alarm Company
2. Alarm Company Phone Number
3. Alarm Subscriber: Business or Resident's Name
4. Business or Residence Owner (if different)
5. Address of Alarmed Location
6. Phone Number of Alarmed Location
7. Mailing Address of Alarm User (if different)

ATTN:

- 8. City, State, Zip Code
9. You must list three persons (Representatives) who will respond, within 30 minutes, in the event of an alarm. These persons must also have a key to the premises and be able to reset a malfunctioning alarm and secure the premises.

Table with 4 columns: Name, Day Phone, Night Phone, Cell Phone. Rows A, B, C.

Type of Alarm: Robbery Intrusion Panic Burglary

Signature of Applicant Date

Upon Approval, a sticker with your permit number will be issued to you and must be posted and visible at the main entrance to your home or business.

Keep the bottom copy for your records.
You must enclose a \$35.00 (initial registration ) permit fee or
\$15.00 (annual renewal) permit fee with the application.
Make Check Payable to: City of Union City

OFFICIAL USE ONLY

Issued by: