



Citrus Heights Police Department
 6315 Fountain Square Drive, Citrus Heights, CA 95621 (916) 727-5500

ALARM PERMIT APPLICATION

DATE	APPLICATION	INVOICE #	PERMIT #
	<input type="checkbox"/> New <input type="checkbox"/> Renewal <input type="checkbox"/> Cancellation		
APPLICANT NAME, (Last, First, Middle) OR BUSINESS NAME (If applicable)		<input type="checkbox"/> Property Owner <input type="checkbox"/> Tenant	<input type="checkbox"/> Residential <input type="checkbox"/> Commercial
ADDRESS (Street, City, Zip)		ACTIVATION <input type="checkbox"/> Audible <input type="checkbox"/> Silent	
BILLING ADDRESS (If different)		NEAREST CROSS STREET	
HOME PHONE	CELL PHONE	E-MAIL	
ALARM COMPANY NAME		DATE OF INSTALLATION	
ALARM COMPANY PHONE		ALARM ACCOUNT NUMBER	
EMERGENCY CONTACT #1 NAME		PHONE #	ALT PHONE #
EMERGENCY CONTACT #2 NAME		PHONE #	ALT PHONE #
HAZARDS / SPECIAL INFORMATION			
<input type="checkbox"/> Dogs <input type="checkbox"/> Hazardous Materials <input type="checkbox"/> Weapons <input type="checkbox"/> Other If any checked, please explain:			
AGREEMENT			
1) Applicant shall renew their permit annually or tri-annually. 2) Applicants shall notify the police Department of any changes or cancellations to the account. 3) Cancellation of the account must be submitted in writing. The account holder may be held responsible for payments accrued on the account if the account has not been properly cancelled. 4) Applicant agrees to reimburse City for the costs incurred by City resulting from excessive false alarms emitted by Applicant's alarm system. 5) False Alarm or Failure to Register invoices will be mailed to the alarm user within 45 days of the false alarm. 6) All payments shall be submitted in full within 30 days from the date of the notice and shall be subject to a late fee of \$25.00 if received after the due date. 7) Fees received more than 60 days after the due date shall be subject to an additional late fee of \$25.00. 8) Alarms that are not monitored but still audible are required to have a permit. 9) Permits are non-transferable. 10) Failure to make timely payments will result in the account being forwarded to a collection agency.			
11) APPLICANT'S SIGNATURE			DATE
Mail completed application & check to: <div style="text-align: center;"> Citrus Heights Police Department Attn: Alarm Unit 6315 Fountain Square Drive Citrus Heights, CA 95621 (916) 727-5500 </div>			

CHPD USE ONLY

DATE RECEIVED	PAYMENT TYPE	REF #.	BATCH	AMOUNT.