LUBBOCK POLICE DEPARTMENT

ALARM PERMIT APPLICATION / RENEWAL

1. APPLICANT

_____ _____

Full Name of Business/Owner/Resident **C.E.O. / Manager / Local Contact (if applicable)**

_____

Alarm Site Address **City** **State** **Zip** **Phone Number (Required)**

_____

Mailing Address (if different) **City** **State** **Zip**

_____ _____

Name & Full Address of Applicant (if different) **Drivers License Number & State (Required)**

_____ **Preferred Method of Contact: _____Mail _____Email**

Email Address

2. Alarm Site: **( ) Residential** **( ) Commercial** **( ) Other**

3. Alarm Type: **( ) Burglary** **( ) Robbery**

4. Alarm Monitoring Company:

_____

Full Name/Address of Alarm Monitoring Company **Alarm Company Phone Number(s)**

5. Permit Holder Responsible For Alarm: When the alarm is activated, list whom you wish to respond to the alarm, in order of preference. List the permit holder, if applicable, then persons who can secure the premises. (Name, Address, and phone numbers required)

1. _____ Phone (Hm&Wk) _____

2. _____ Phone (Hm&Wk) _____

(Please initial <u>each</u> set of parenthesis indicating your understanding. Failure to do so will result in a delay processing the application.)

( )I have read the completed application and represent the same to be true and correct. ( )I have received a copy or read City Of Lubbock Ordinance No. 2025-00111. ( )I agree, that if a permit is issued, I will comply with the provisions of any applicable Texas State Law and the City of Lubbock Ordinance No. 2025-00111. ( )I further acknowledge the $50.00 Alarm Permit Application fee and understand this fee is <u>nonrefundable</u> whether or not the permit is issued.

I accept responsibility for payment of all fees or fines that may result from the operation of the alarm system serving the above alarm site. I will surrender this permit if I transfer ownership of the alarm site property.

_____

Permit Applicant Signature (Required) **Date of Birth (Required)** **Date Signed (Required)**

Permit Fee: $50.00 **Home Owners 65 & Older: $25.00** **Business Owners: $50.00** **(Unless otherwise noted on your invoice)**	**Make Checks Payable To:** **City of Lubbock Alarm Permits** **Credit Card Payments by mail:** **Completed Autorization Form is required** **Return this form and registration fee to:** **City of Lubbock** **Police Records** **P.O. Box 2000** **Lubbock, TX 79457**

LUBBOCK POLICE DEPARTMENT USE ONLY / DO NOT WRITE IN THIS SECTION

PERMIT # _____ DATE RENEWED: ____/____/_____ ___ORIGINAL PERMIT ___ RENEWAL PERMIT

P.O Box 2000, Lubbock, TX 79457
1205 15th St, Lubbock, TX 79401
(806) 775-3041

False Alarms Credit Card Authorization

Card Holder Name: _____

Credit Card Number: _____

Expiration Date: _____ CVV/CVS: _____

Zip Code on Card: _____

Amount to be Charged: $_____

Please check type of card:

Visa_____ Discover_____ Amex_____ MasterCard_____

Reason for Charge: _____

Signature: _____

I hereby authorize the City of Lubbock False Alarms Department to charge the agreed amount listed above to my credit card provided. I agree that I will pay for this purchase in accordance with the issuing bank cardholder agreement.

**** Please note: Maximum Transaction Limit = $1,600.00**
**** Forms cannot be submitted electronically**
**** The City of Lubbock charges a 2.49 service fees on all card transactions exceeding the minimum service fee of $1.00.**

City of Lubbock False Alarms Department
(806) 775-3041