

ALARM SYSTEM / LOW VOLTAGE
PERMIT APPLICATION

ALARM SYSTEM (FIRE / BURGLAR)
 (check State Certification)

LOW VOLTAGE – Voice, Data, Cable, Phone, Other _____

JOB ADDRESS: _____
SUBDIVISION: _____ **LOT#** _____
OWNER/BUILDER'S NAME: _____ **PHONE#:** _____

- | | |
|--|--|
| <u>TYPE OF OCCUPANCY:</u> | <u>WORK TO BE DONE IN:</u> |
| <input type="checkbox"/> RESIDENTIAL | <input type="checkbox"/> NEW BUILDING |
| <input type="checkbox"/> COMMERCIAL | <input type="checkbox"/> BUILDING ADDITION |
| <input type="checkbox"/> INSTITUTIONAL | <input type="checkbox"/> EXISTING BUILDING |
| | <input type="checkbox"/> OTHER |

Permit fees shall be based on the following schedule:		
Select One		Show # of bldgs.
Single Family Residential / Garden Homes	\$ 30.00	
Townhomes	\$ 30.00 per building	
Apartments / Condominiums / Duplex	\$ 50.00 per building	
Commercial / Non-Residential	\$ 100.00 per building	

I HEREBY CERTIFY THAT I HAVE READ THIS APPLICATION AND THAT ALL INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT AND THAT I AGREE TO COMPLY WITH ALL CITY ORDINANCES AND STATE LAWS REGULATING THE INSTALLATION OF ALARM SYSTEMS. I AM THE OWNER OR AM AUTHORIZED TO ACT AS THE OWNER'S AGENT FOR THE HEREIN DESCRIBED WORK.

COMPANY NAME: _____

ADDRESS:

 _____ City State Zip Code

PHONE #: _____ **EMAIL (REQUIRED):** _____

(SIGNATURE OF CONTRACTOR OR AUTHORIZED AGENT)

_____ BUILDING OFFICIAL	_____ DATE	_____ PERMIT FEE	_____ PERMIT NO.
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