



Roseville Police Department  
 1051 Junction Blvd  
 Roseville, CA 95678

Daniel Hahn, Chief of Police

## Alarm Permit Application

RPD 80 / 2013

THIS FORM MUST BE COMPLETED IN FULL. PLEASE PRINT OR TYPE IN THE BOXES PROVIDED.

- ▶ Application fee of \$35.00. (Exact cash or check only – payable to the City of Roseville).
- ▶ Submit to Roseville Police, ATTN: Community Services Unit, 1051 Junction Blvd, Roseville CA 95678 916-774-5093

### PERSONAL INFORMATION

|                         |                       |                   |  |                   |
|-------------------------|-----------------------|-------------------|--|-------------------|
| <b>APPLICANT NAME</b>   | LAST, FIRST MIDDLE    | <b>EMAIL</b>      |  |                   |
| <b>ADDRESS OF ALARM</b> | STREET CITY STATE ZIP |                   |  |                   |
| <b>HOME PHONE</b>       |                       | <b>CELL PHONE</b> |  | <b>WORK PHONE</b> |

### BUSINESS ESTABLISHMENT INFORMATION (IF BUSINESS ALARM)

|                                |                       |                          |              |                   |
|--------------------------------|-----------------------|--------------------------|--------------|-------------------|
| <b>BUSINESS NAME</b>           |                       | <b>AFTER HOURS PHONE</b> |              |                   |
| <b>PHYSICAL ADDRESS</b>        | STREET CITY STATE ZIP |                          |              |                   |
| <b>NAME OF OWNER / MANAGER</b> |                       |                          | <b>EMAIL</b> |                   |
| <b>HOME PHONE</b>              |                       | <b>CELL PHONE</b>        |              | <b>WORK PHONE</b> |

### ALARM COMPANY INFORMATION

|                                |                       |              |              |  |
|--------------------------------|-----------------------|--------------|--------------|--|
| <b>ALARM COMPANY NAME</b>      |                       | <b>PHONE</b> |              |  |
| <b>ALARM COMPANY ADDRESS</b>   | STREET CITY STATE ZIP |              |              |  |
| <b>MONITORING COMPANY NAME</b> |                       |              | <b>PHONE</b> |  |

TYPE OF ALARM (check all that apply)

ROBBERY  BURGLARY  MONITORED  AUDIBLE

Applicant agrees to:

1. Reimburse the City of Roseville for the partial cost of police response to excessive false alarms per the City Ordinance.
2. Abide by all provisions of the Alarm System Ordinance (Roseville Municipal Code, Chapter 10.64) as that ordinance now exists or may hereafter be amended.

APPLICANT \_\_\_\_\_  
Print Name and Sign

DATE \_\_\_\_\_