## SECURITY ALARM LICENSE APPLICATION

PLEASE PRINT LEGIBLY OR TYPE INFORMATION. Attach additional information if necessary.

ALARM LICENSE TO BE ISSUED IN THE NAME OF:  Residential Commercial New Renewal				New Renewal
Individual or Business Name	Complete Add	lress of Site to be Licensed		
Email				Phone Number
Commercial only: If the alarm permit is to b partners or other person(s) legally responsible			ollowing inform	ation of the corporate officers,
Name	Comp	olete Mailing Address		
Email				Phone Number
Contact information of the person(s) in opera	ational control of the property	y, if other than applicant.		
Name	Comp	olete Address		
Email				Phone Number
Security Alarm Company: Company contra	acted to monitor alarm system	n:		
Company Name	Comp	olete Address		Phone Number
Emergency Contacts: List two (2) persons, one of whom does not r A. Receive notification at any tim B. Come to the alarm site within c C. Grant access to the alarm site a	ie; one hour after receiving a req	quest from a member of the El Paso		nent to do so; and
Name				Phone Number
(2)				
Name				Phone Number
***THE LICENSE HOLDER MUST NOT OR EMERGENCY CONTACTS WITHIN T WITHOUT PROVIDING SUCH CHANGE	TWENTY (20) DAYS OF SU	UCH CHANGE. ANY PERSON V	WHO CONTIN	UES TO OPERATE AN ALARM SYSTEM
El Paso Municipal Code §5.13.070 False A in accordance with Section 214.197, Local during the preceding twelve-month period. but fewer than six other false alarms in the false alarms in the preceding twelve-month period. The police chief shall notify the perion the preceding twelve-month period. The alarm user awareness class as set forth in Sthirty days of the date of the notice or compermit holder or other person in control of the section of the sect	Government Code or its su The amount of the penalty f preceding twelve-month per period; or one hundred dol mit holder or other person in notice shall be made in writt Section 5.13.060 of the ELP pletes the next available alar	for the signaling of a fall- for the signaling of a false alarm s eriod; seventy-five dollars, if the l llars, if the location has had eight in control of the alarm system that ing and shall contain a statement to Paso Municipal Code. If the perm im user awareness class, whicheve	Ise alarm if at leshall be fifty do location has had or more other in the alarm site that the permit hit holder comp	east three other false alarms have occurred llars if the location has had more than three d more than five but fewer than eight other false alarms in the preceding twelve-month has exceeded three false alarm notifications holder may, at his or her election, attend an letes the alarm user awareness class within
**NOTE: Send a written cancellation request; doing so prevents you from acquiring permit violations when you no longer live at the registered address. For your convenience, cancellation notices and changes to contact information, alarm company, or emergency contacts are accepted by mail or email.				

Return Completed Applications with payment to: Planning & Inspections Department-One Stop Shop 811 Texas Ave. El Paso, Texas 79901 (915) 212-0104 Fax (915) 212-0105

Email: OSSHelp@elpasotexas.gov



Signature of Authorized Applicant

Make check payable to: City of El Paso