

City of Terre Haute
GEN.ORD.NO.5, 1996
ALARM BUSINESS LICENSE

PERMIT FEE: \$250.00

Business Name _____

Business Address _____

Business Phone _____

Manager's Full Name _____

Manager's Business Address _____

Manager's Home Address _____

Contact Person _____

Contact Phone Number _____

ALARM AGENTS:

1) Name _____

Address _____

DOB _____

4) Name _____

Address _____

DOB _____

2) Name _____

Address _____

DOB _____

5) Name _____

Address _____

DOB _____

3) Name _____

Address _____

DOB _____

Please list additional names on a separate sheet.
**YOU MUST PROMPTLY NOTIFY THE CITY CONTROLLER IN WRITING
OF ANY CHANGE IN THE INFORMATION CONTAINED IN THE APPLICATION FORM.**