

ALARM SYSTEM PERMIT
City of Terre Haute

Permit No. _____

Name of person in control of property _____

Names & phone numbers of persons or alarm system business who will respond:

Address of property alarm is installed _____

1. Name _____

Phone _____

Phone _____

Name of business where alarm is installed _____

2. Name _____

Phone _____

Name of alarm system business or person who installed or will install alarm _____

Office Use Only
Payment Method _____
Effective Dates _____
Received By _____

Local alarm
Yes No

Alarm for:
Burglary Holdup
Other type of emergency

Fee: \$10.00 - every 2 years
