

City of Jonestown, Texas

| Permit/Reg. No | |
|----------------|--|
| СК# | |
| AMT\$ | |
| DATE | |

Alarm System Permit/ Registration Application

A NON-REFUNDABLE PERMIT/REGISTRATION FEE MUST BE SUBMITTED WITH EACH PERMIT/REGISTRATION FORM. PERMIT MUST BE RENEWED AND FEE PAID ANNUALLY. PLEASE MAKE CHECKS OR MONEY ORDERS PAYABLE TO: City of Jonestown

Residential Alarm Permit User Information: (Residential alarm users please complete Section A and C through F.)

| First Name Street Number | | Las | t Name | | |
|--------------------------|----------------------|---|--|--|--|
| | | | | | |
| | Stroot N/ | ama | Suite/Apt No | | |
| | Sireerina | Street Name Suite/Apt. No. | | | |
| | State | Zip Code | Gate | Gate Code | |
| | Cell Phone | E-mail Ad | E-mail Address | | |
| all that apply): E | 3urglar □ Pa | inic 🗆 Medica | I C Robbery | Robbery/Holdup 🛛 | |
| rm User Informat | ion: (Comme | ercial alarm users please | e complete Section B | through F.) | |
| | Alarm Locatio | on: | | | |
| | | Street Number | Street Name | Suite No | |
| | | | | | |
| rst Name | Last Name | Cell Pho | one ł | Home Phone | |
| | Last Name | Cell Pho | one ł | Home Phone | |
| \$: | | | | | |
| tion (List two people | e other than the owr | per, who can respond to | alarm activation) | | |
| | , ea.or man mo own | | | | |
| | Last Name | Cell Pho | one | Home Phone | |
| | | | | | |
| Irst Name | | | one | Home Phone | |
| | ny: | | | | |
| | irm User Informati | Cell Phone all that apply): Burglar □ arm User Information: (Comme irm User Information: Alarm Location irst Name Last Name irst Name Last Name | Cell Phone E-mail Addition all that apply): Burglar Panic Medical arm User Information: (Commercial alarm users please Image: Commercial alarm users please Image: Commercial alarm users please Image: Alarm Location: Image: Commercial alarm users please Image: Commercial alarm users please Image: Alarm Location: Image: Commercial alarm users please Image: Commercial alarm users please Image: Image: Alarm Location: Image: Commercial alarm users please Image: Commercial alarm users please Image: Image | Cell Phone E-mail Address all that apply): Burglar Panic Medical Robbery rm User Information: (Commercial alarm users please complete Section B for the section in the commercial alarm users please complete Section B for the section in the commercial alarm users please complete Section B for the section is the section in the commercial alarm users please complete Section B for the section is the section in the commercial alarm users please complete Section B for the section is the se | |

I have carefully read the completed application and know the same to be true and correct. I hereby agree that if a permit is issued, I will comply with all the provision of the City of Jonestown. I understand that I will be responsible for the payment of all fees and charges and any civil action which may arise from the operation of this alarm system.

Siganture: ____