Plantation
the grass is greener®

ALARM PERMIT # _____

ALARM PERMIT APPLICATION FORM

(Please Print or Type)

Applicant Information

☐ **Residential** ☐ **Commercial**

Name _____

Driver's License _____

Address _____

City _____ State _____ Zip Code _____

Mailing Address (if different) _____

Contact Numbers

Home _____

Business _____

Cell _____

Emergency Contact Information -- Names of persons who can be reached at any time - day or night - who have a key to the premises and the alarm code, and who are authorized to respond to an alarm signal.

Name _____ Cell _____ Home _____

Name _____ Cell _____ Home _____

THIS IS TO CERTIFY THAT:

ACKNOWLEDGEMENTS

The alarm system has a back-up power supply to prevent false alarms.

Alarm permits are non-assignable and are issued and effective only for the permitted alarm system and permitted user.

Every alarm user shall prominently post the alarm system's permit number on the premises, at or near the front entrance and visible from the outside of the structure.

Every permitted alarm user shall be required to provide the Plantation Police Department with any changes in information required on this Permit Application, when such changes occur.

Permit applicant agrees to hold the City of Plantation harmless and indemnifies the City for any property damage deemed reasonably necessary by the Police or Fire Department in order to respond adequately to an alarm.

POLICE / BURGLAR ALARMS

The alarm system annunciator has the capacity to automatically silence within 15 minutes (residential permits) or 30 minutes (commercial permits) after activation, and that such alarm systems shall not sound again unless a new criminal act or emergency triggers the alarm.

This Permit Application may be denied or revoked by the Plantation Police Department if it is established that the Applicant has provided any false information.

FIRE ALARMS

All alarms will comply with Florida State Fire Marshal's Uniform Fire Safety Rules 4A-48.

RECEIPT

I have received a copy of the City of Plantation Alarm Ordinance, and that I will be governed by it in regard to the alarm system which is hereby applied for, including the listed prohibitions, operating standards, operating instructions, false alarms, revocation of permit, alarm review committee, and penalties.

Date _____ **Signature of Applicant** _____

(Police Department Use Only)

Permit Issued By _____ **Date** _____ **Fee $25.00** **Cash** ____ **Check** ____

(Please make checks payable to Plantation Police Department)

Plantation Police Department -- ALARMS
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phone: 954.797.2791 x: 954.797.2724
www.psd.plantation.org