

City of Reynoldsburg
Dept. Of Public Safety
Division of Police

Date Permit Issued _____
Permit Number _____

ALARM PERMIT APPLICATION

Home Owner's Name _____ DOB _____

Address _____

Home Phone _____ Work Phone _____

-OR-

Business Name _____ Phone Number _____

Business Address _____

Persons to contact in case of emergency (name, address, phone number)

1. _____

2. _____

3. _____

Type of Alarm System: Dialer _____ Central Monitoring _____
Alarm Company _____ Phone Number _____

Alarm Activation Locations:

Exterior Doors _____ Windows: _____ a) ground level
b)second floor
c)basement

Interior: Tread Pads _____ Panic Button _____ Monitor Detector _____ Indoor Sounder _____

THERE IS A ONE TIME FEE OF \$25.00 FOR THIS PERMIT. PLEASE MAKE YOUR CHECKS PAYABLE TO THE CITY OF REYNOLDSBURG. MAIL THEM TO 7240 E. MAIN STREET, REYNOLDSBURG, OHIO 43068.

IF YOU ARE 62 YEARS OF AGE OR OLDER YOU DO NOT HAVE TO PAY THE \$25.00 FEE BUT YOU STILL NEED TO FILL OUT AND RETURN THIS PERMIT.

Any change of information on this permit shall be forwarded to 7240 E. Main Street within 10 days after the change so this department can maintain accurate information. 715.02(e)