



City of Morgan's Point, Texas

Application for Alarm System

Owner Information

Property Owner's Name or Name of Business: _____

Alarm System Location: _____

Owner's Phone Numbers: Work _____ Cell _____ Home _____

Email Address: _____

Alarm Company Information

Alarm Company: _____

Mailing Address: _____

Contact Representative: _____

Phone Number: _____

Consenting Local Emergency Contacts

Name	Address	Phone Numbers
_____	_____	_____
_____	_____	_____
_____	_____	_____

Types of Alarm

- Audible Audible & Company Notification Silent Lights Activated
 SENSORS: Doors Windows Motion Zones

Acknowledgement

The names and telephone numbers supplied above are of an alarm business, other business, or other designated representatives who is able and had agreed to comply with Sec. 30-53 (1) through (3) of Ordinance No. 09-554. I certify that I have received a copy of the City of Moran's Point Ordinance No. 09-554 "Alarm Systems". I understand the conditions set forth, and request permit for an alarm system to be installed or brought up to current specifications.

Each permit issued pursuant to Ordinance No. 09-554, shall be personal to the permit holder and is not transferable.

Applicant: _____ Date _____

Issued By: _____ Date _____

Permit Number: _____ Fee **\$25.00 ANNUALLY**