



# City of San Clemente Police Services



(Office Use Only)

Alarm # \_\_\_\_\_

Expires \_\_\_\_\_

## ALARM PERMIT APPLICATION

### COMMERCIAL ALARM π

1. BUSINESS NAME \_\_\_\_\_

2. BUSINESS ADDRESS \_\_\_\_\_ ZIP CODE \_\_\_\_\_

3. BUSINESS PHONE # \_\_\_\_\_

4. BUSINESS HOURS \_\_\_\_\_

5. OWNERS NAME \_\_\_\_\_ PHONE # \_\_\_\_\_

6. BILLING ADDRESS (if different from above) \_\_\_\_\_

7. ALARM COMPANY \_\_\_\_\_ PHONE # \_\_\_\_\_

8. EMERGENCY CONTACTS AFTER BUSINESS HOURS

NAME

PHONE #

A. \_\_\_\_\_

B. \_\_\_\_\_

C. \_\_\_\_\_

### RETURN PERMIT WITH \$40.00 FEE TO

CITY OF SAN CLEMENTE  
100 AVENIDA PRESIDIO  
SAN CLEMENTE, CALIFORNIA 92672

THERE SHALL BE A 72 HOUR (3 WORKING DAYS) ACTIVATION PERIOD IN WHICH TO PROPERLY ENTER THE ALARM INFORMATION. THE ACTIVATION PERIOD SHALL BEGIN ONCE THE ALARM PERMIT CONTAINING THE REQUIRED INFORMATION HAS BEEN RECEIVED. NO ALARM PERMIT WILL BE PROCESSED UNLESS ALL OF THE NECESSARY INFORMATION HAS BEEN PROVIDED AND THE PROPER FEE PAID.