



Registration Form



INSTRUCTIONS: Print legibly or type. Complete all application items. Complete a separate application for each address to be permitted. Attach payment and return to the address shown at the bottom of this form

1 Alarmed Location

Occupant Name or Business Name _____

Address _____

Suite/Apt# _____

City _____ State _____ Zip _____

2 Mailing Information

Name _____

Address _____

City _____ State _____ Zip _____

Phn1 _____

Phn2 _____

Phn3 _____

Email _____

3 Contact Names

Contact 1

Name _____

Contact 2

Phn1 _____

Phn2 _____

Phn1 _____

Phn2 _____

4 Additional Information

Date Installed/Activated _____

Automatic Reset

Audible

Special Conditions/ Hazards _____

5 Alarm Companies

Monitored By _____

Phn1 _____

I understand that, in accordance with City Code, applicant is financially responsible for all charges and penalties specific in this section.

Signature _____ Date _____

NOTE: If information provided in application changes, you must notify the Security Alarm Enforcement Section within ten (10) working days. Attach your check, made payable to the City of Hurst and mail or deliver to:

Attn: Alarm Permit Officer
825 Thousand Oaks Drive
Hurst, TX 76054