

DATE SUBMITTED

PERMIT NO.

ACCEPTED BY

EXPIRATION



Plumas County Sheriff's Office

1400 E. Main St. Quincy, CA 95971-9402

PHONE (530)-283-6375 FAX (530)283-6344

DISPATCH (530)283-6300

ALARM SYSTEM PERMIT APPLICATION

(ONE PERMIT APPLICATION REQUIRED FOR EACH ALARM SITE)

*****PLEASE PRINT LEGIBLY*****

| | | | |
|--|---------------------------------|------------------------------|------------------------------------|
| <i>TYPE OF PERMIT REQUESTED</i> | | | |
| NEW ALARM PERMIT - \$45.00 | ANNUAL PERMIT RENEWAL - \$25.00 | INFORMATION CHANGE - NO FEE | |
| <i>ALARM USER REQUESTED</i> | | | |
| Owner Name: _____ | | | |
| Physical Address of Alarm Site: _____ | | | |
| City, State, Zip: _____ | | | |
| Phone Number at Alarm Site: _____ | | | |
| Codes Needed to Access Alarm Site: _____ | | | |
| Physical Address (If Different Than Alarm Site): _____ | | | |
| Phone Number (If Different Than Alarm Site): _____ | | | |
| Mailing Address: _____ | | | |
| Alarm Company: _____ | | | |
| Phone Number of Alarm Company: _____ | | | |
| Mailing Address of Alarm Company: _____ | | | |
| <i>RESPONSIBLE REPRESENTATIVES</i> | | | |
| <small>Persons that will be notified by the Sheriff's Office if an alarm is activated and there is no answer at the alarm site. They will need to know the location and how to reset the alarm system. Cannot be anyone living at the alarm premises. Minimum of two (2) required.</small> | | | |
| <u>Name</u> | <u>Address</u> | <u>Phone#</u> | <u>Response Time</u> |
| 1) _____ | _____ | _____ | _____ |
| 2) _____ | _____ | _____ | _____ |
| 3) _____ | _____ | _____ | _____ |
| <i>ALARM SITE INFORMATION</i> | | | |
| BUSINESS | GOVERNMENT OFFICE | RESIDENTIAL | |
| Business Name: _____ | | _____ Full-time Residence | |
| Business Hours: _____ To: _____ | | _____ Part-time Residence | |
| Days Closed: _____ | | _____ Seasonal/Vacation Home | |
| <i>TYPE OF ALARM</i> | | | |
| *****NO AUTOMATIC DIALING DEVICES ARE PERMITTED***** | | | |
| (Mark all that apply & note any relevant information) | | | |
| Silent | Audible | Manual Activation | Motion, Sound, Vibration Activated |
| Robbery | Intrusion | Medical | Fire Panic |
| Additional Information: _____ | | | |
| _____ | | | |

