

No: _____
Fee: \$15.00 Annually

Date Paid: _____
Receipt No: _____

CITY OF HARTFORD ALARM SYSTEM APPLICATION

INSTRUCTIONS: Read through the entire application before answering. Fill in completely. Print or type answers, except signature. Falsification of any answer to the questions in this application will void said application in its entirety, or any permit issued pursuant to it. File this application with the City of Hartford Police Department, 110 N. Johnson Street, Hartford, WI 53027. Check or money orders should be payable to "City of Hartford". A copy of the approved permit will be sent to you.

Application is hereby made for a permit to install and operate an alarm system. Date: ____/____/____

Applicant (business name): _____

Mailing address: _____

Address of alarm if different from above: _____

This alarm is: Residential Commercial Phone: _____

Please specify the type of alarm system installed:

- Burglary
- Fire
- Local alarm (Ringer)
- Silent/Hold-Up
- Visual
- Emergency/Assistance

Name of monitoring service: _____ Phone: _____

Whom to notify in the event of an alarm:

1. _____
Name Cell Phone Home Phone
Address
2. _____
Name Cell Phone Home Phone
Address
3. _____
Name Cell Phone Home Phone
Address
4. _____
Name Cell Phone Home Phone
Address

I hereby tender the permit fee. Signature: _____

(For office use only)

Permission to (install and) operate the afore described alarm system at the location given, subject to the ordinances of the City of Hartford, Section 5.10 is granted on ____/____/____