

**ALARM PERMIT APPLICATION**  
**MIDLAND POLICE DEPARTMENT**  
**RECORDS DIVISION**  
 601 N. Loraine St.  
 MIDLAND, TX 79701  
 432-685-7145

**INSTRUCTIONS**

Please complete and return the Application and fee to the address above or deliver to the Midland Police Department at 601 N. Loraine St.  
**PLEASE READ INSTRUCTIONS BEFORE FILLING OUT APPLICATION.**

1. Any misrepresentation of requested information may result in an application for an Alarm Permit being denied.
2. The Midland Police Department must have the name, home and business addresses and all telephone numbers of the Application/Permit holder. **A COMPANY NAME IS NOT ACCEPTABLE.**
3. Signature of the Applicant/Permit holder must be the signature of the person listed as permit holder.
4. Please include all ZIP and AREA CODES.
5. Application must include a check or money order in the amount of \$20.00 for a Residential Alarm or \$25.00 for a Commercial Alarm, made payable to the City of Midland, or be paid in cash at the Midland Police Department Records Division.

Address where Alarm System is located (include Apt., Unit or Bldg. Number).			
Applicant/Permit Holder's Name (Last, First, MI)		Driver's License State and Number	
Home Address (include Apt., Unit or Bldg. Number)		City, State, Zip Code	Home Phone
Place of Employment (Name & Address)		City, State, Zip Code	Business Phone
Alarm Type <input type="checkbox"/> Residential <input type="checkbox"/> Commercial		If Commercial, Business Name	
Type of Alarm System	<input type="checkbox"/> Burglary	<input type="checkbox"/> Robbery	<input type="checkbox"/> Panic <input type="checkbox"/> Other (specify):
Alarm Company Name	Address		Telephone
Permit Holders Billing Address (where renewal form will be sent to)		City, State, Zip Code	
NAME AND PHONE NUMBERS of two persons with responsibility for responding w/keys to an alarm notification.			
Name	Home Phone	Business Phone	Cell Phone/Pager #
Describe Area Protected by this system (Bldg. Perimeter, inside motion detector, glass, safe, fence, etc.)			
List any known hazards Police Officers may encounter at Alarm Location (Dogs, Barbed Wire, Chemicals, etc)			
I have carefully read the completed application and know it to be true and correct and hereby agree that if a permit is issued, I will comply with all provisions of City Ordinance 7175 and applicable state laws. I accept responsibility for payment of all fees and fines that may result from the operation of the alarm system described above.			
Signature of Applicant/Permit Holder			Date