PERMIT#	

ALARM USER PERMIT FORM

PD 892 NORFOLK POLICE DEPARTMENT CHANGES: Notify the Norfolk Police Department immediately if any changes are made in the information provided on this application form. Changes should be sent to: Norfolk Police Department - Central Records Division 3661 E. Virginia Beach Blvd. Fax: 757-664-7001 Norfolk VA 23502 Phone: 757-664-7054 APPLICATION for: Commercial Residential NAME of alarm system user: ADDRESS: Telephone Zip · City State RESPONSE AUTHORIZATION: List at least two (2) persons authorized to respond to alarm: Telephone First Name Last Name 1. 2. 3. TYPE of Alarm Systems:
Monitored Local New system Existing systems ALARM COMPANY: Alarm company operator selling or leasing system equipment: Phone Address Company Name ALARM COMPANY INSTRUCTOR / INSTALL: Alarm company operator who instructed alarm system user in proper use and operation: Signature Full name (print) Date ALARM COMPANY MONITOR: Company monitoring system equipment is the: Same / or Different (If different, fill out information below) Phone Address Company Name ALARM SYSTEM USER: Alarm system user who was instructed by alarm company operator in proper use and operation: Signature Date Full name (print) UPON APPROVAL BY THE SIGNATURE BELOW, ALARM SYSTEM USER PERMIT SHALL BE ISSUED.

	FOR POLICE DEPARTMENT USE ONLY:		
APPROVAL:	Approved Disapproved	Date:	_

SIGNATURE: Commanding Officer or Designee, Central Records Division