

# ALARM PERMIT APPLICATION

## City of Oklahoma City

PLEASE PRINT CLEARLY. Instructions are on the back of this form.

Permit Type: \_\_\_\_\_ Residential \_\_\_\_\_ Business

Business Name: \_\_\_\_\_

Requestor's Name: \_\_\_\_\_  
Last Name First Name

Alarm Address: \_\_\_\_\_  
Street Type  
City State Zip Code Apt/Suite #

Mailing Address: \_\_\_\_\_  
Street Type  
City State Zip Code Apt/Suite #

Phone Info: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Type \_\_\_\_\_  
\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Type \_\_\_\_\_

E-mail Address (optional): \_\_\_\_\_

Type of Alarm (Check all that apply): \_\_\_\_\_ Hold Up \_\_\_\_\_ Silent \_\_\_\_\_ Loud \_\_\_\_\_ Panic \_\_\_\_\_ Fire \_\_\_\_\_ Water Flow

Alarm Company: Responsible for monitoring the alarm, if applicable.

\_\_\_\_\_ Phone Info: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Contacts: A minimum of two (2) contact people is recommended, other than the requestor.  
Best if they are able to respond to the alarm location within a reasonable amount of time.

1. \_\_\_\_\_  
Last Name First Name  
\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Type \_\_\_\_\_  
Primary Phone Secondary Phone

2. \_\_\_\_\_  
Last Name First Name  
\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Type \_\_\_\_\_  
\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Type \_\_\_\_\_

3. \_\_\_\_\_  
Last Name First Name  
\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Type \_\_\_\_\_  
\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Type \_\_\_\_\_

Return this application and **\$27.00 fee** (by check or money order, payable to the City of Oklahoma City) to:  
Oklahoma City Police Department – Permit and ID Section  
P.O. Box 268837  
Oklahoma City, OK 73126-8837

You may download additional forms from our websites at [www.okc.gov](http://www.okc.gov) or [www.ocpd.com](http://www.ocpd.com). To request additional forms by mail or if you require further assistance, contact the Oklahoma City Police Dept. Permit and ID Unit by email at [ocpd.alarmpermits@okc.gov](mailto:ocpd.alarmpermits@okc.gov) or call us at (405) 297-1109. Our office is located at 200 N. Shartel Ave., on the second floor.

## ALARM PERMIT APPLICATION INSTRUCTIONS:

**Please print clearly. If you make a mistake, please use whiteout to make the correction or use a new form. Do not strike out or overwrite the information.**

**Permit Type:** Residential – home, place of residence, non-business, alarm permit  
Business – this is a commercial alarm permit

**Business Name:** The name of the business applying for commercial permit. Example: ACME, Inc.

**Requestor's Name:** For residence, the Owner/Tenant; for a business, the Owner/Manager or Department

**Alarm Address:** Physical address where the alarm system is installed/located. Example: 3303 Bloom Pkwy  
(Use the following tables for Street Directions and Types: Include Suite #, Apt. #, Bldg. # as applicable.)

Street Directions:

N	-	North
NW	-	North West
NE	-	North East
S	-	South
SW	-	South West
SE	-	South East
W	-	West
E	-	East

Street Types:

Ave	-	Avenue	Blvd	-	Boulevard
Cir	-	Circle	Ct	-	Court
Dr	-	Drive	Ln	-	Lane
Pl	-	Place	Pkwy	-	Parkway
Plz	-	Plaza	Rd	-	Road
Sq	-	Square	St	-	Street
Ter	-	Terrace	Trl	-	Trail
Way	-	Way	Tpke	-	Turnpike
			Hwy	-	Highway

**Mailing Directions:** Address where mail should be directed. Example: 1234 N. May Ave. or PO Box 1234

**Phone Information:** Current/reliable phone numbers, used for contacting those named in the application

**Phone Type:** The type of phone number listed (required): B-Business, C-Cell, H-Home or P-Pager

**E-mail Address:** Information is optional (not required) in anticipation of future upgrades to the system

**Type of Alarm:** Check all that apply:  
Hold-Up, Silent (intrusion), Loud (external), Panic, Fire or Water Flow

**Alarm Co. Name:** The name of the company responsible for monitoring your alarm system, if applicable

**Alarm Co. Phone:** The (contact) phone number, local, long distance or toll free, of your alarm company

**Contacts:** Should the requestor be unavailable, people they wish contacted if there is an activation of the alarm system, a break-in or emergency. Should be someone other than the requestor, whose info is already listed above. Contacts should have the ability to respond to the alarm location in a reasonable amount of time (within two hours).

If you require additional assistance, contact the Oklahoma City Police Permits & ID Unit by email at [ocpd.alarmpermits@okc.gov](mailto:ocpd.alarmpermits@okc.gov) or call us at (405) 297-1109. Our office is located at 200 N. Shartel Ave., on the second floor. We are open Monday through Friday, 8:00 AM to 4:00 PM, closed weekends and national holidays.