

For initial registration, complete this permit application and submit it with payment to the Chandler Police Department Alarm Unit. For a renewal permit, please review information for accuracy and update any necessary fields. Sign, date and return application and payment to the Chandler Police Department Alarm Unit.

alarms@chandleraz.gov

\$10.00 registration/renewal fee enclosed (Make checks payable to Chandler Police Department.)

Registration Fee Waiver (Residential Alarm Users age 65 and older are exempt from the permit fee.)

DOB (if exempt): _____

| Location (physical address) | | | | Responsible Party (mailing address) | | | |
|--------------------------------------|---------|-----|--|--------------------------------------|---------|-----|--|
| Name (Last , First) or Business Name | | | | Name (Last , First) | | | |
| Street Address and Apt./Ste. | | | | Street Address and Apt./Ste. | | | |
| City | State | Zip | | City | State | Zip | |
| Phone 1 | Phone 2 | | | Phone 1 | Phone 2 | | |
| Email Address | | | | Email Address | | | |
| Contact Person 1 | | | | Contact Person 2 | | | |
| Name (Last , First) | | | | Name (Last , First) | | | |
| Street Address and Apt./Ste. | | | | Street Address and Apt./Ste. | | | |
| City | State | Zip | | City | State | Zip | |
| Phone 1 | Phone 2 | | | Phone 1 | Phone 2 | | |
| Email Address | | | | Email Address | | | |
| Special Conditions: | | | | | | | |
| Monitored By | | | | Sold By | | | |
| Name (Last , First) or Business Name | | | | Name (Last , First) or Business Name | | | |
| Street Address and Apt./Ste. | | | | Street Address and Apt./Ste. | | | |
| City | State | Zip | | City | State | Zip | |
| Phone | Fax | | | Phone | Fax | | |
| Email Address | | | | Email Address | | | |

It is the alarm owner's responsibility to prevent false alarms and to ensure that all system users are properly trained. I hereby certify that the above information is accurate. I accept complete responsibility for any and all charges and/or fees incurred by installing and using this alarm system in accordance with the City of Chandler Municipal Code Chapter 24.

Signature: _____ Date: _____