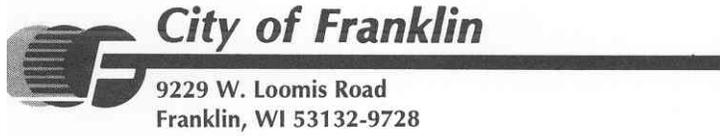


- Residential
- Commercial
- Updated Information



City Clerk's Office 414-425-7500

Alarm Application & Permit

Applicant Information

Applicant/Property Owner _____ DOB _____
 Business Name _____
 Applicant Address _____ City _____ ST ____ Zip _____
 Phone _____ Phone 2 _____ Phone 3 _____
 Fax _____ E-Mail _____

Alarm Information

Installation Address _____ Installer Company _____
 Installer Address _____ City _____ ST ____ Zip _____
 Phone _____ Phone 2 _____ Phone 3 _____
Types of Alarm Motion Detector Door/Window Contacts Heat/Smoke Pressure Detection Fire Alarm Pull Stations
Signal Types Audible Visual Silent
Events Detected Holdup Burglary Fire Health Water flow Heat Intrusion

Emergency/Keyholder Information

Emergency Contact # 1 _____ Position/relationship _____
 Address _____ City _____ ST ____ Zip _____
 Phone _____ Phone 2 _____ Phone 3 _____
 Fax _____ E-Mail _____
 Emergency Contact # 2 _____ Position/relationship _____
 Address _____ City _____ ST ____ Zip _____
 Phone _____ Phone 2 _____ Phone 3 _____
 Fax _____ E-Mail _____
 Emergency Contact # 3 _____ Position/relationship _____
 Address _____ City _____ ST ____ Zip _____
 Phone _____ Phone 2 _____ Phone 3 _____
 Fax _____ E-Mail _____

Alarm Permit Fees

Private Alarm System Intrusion Fire **Fee \$5.00** (one-time fee)

My signature hereunder acknowledges that I have received a summary of Section 76, Franklin Municipal Code regarding alarms; that I will voluntarily comply with the requirements therein; that Police and/or Fire Department personnel are hereby authorized to enter the above-listed premises to determine the source of the alarm; and that a false alarm fee may be imposed for violations of the Code.

Signature _____ Date _____

OFFICE USE: PERMIT # _____ DATE APPROVED _____ COPY TO: POLICE DEPARTMENT FIRE DEPARTMENT