



The City of  
**OKLAHOMA CITY**  
Development Services

# ALARM/SPRINKLER CONTRACTORS INFORMATION FORM

Name of Firm/Company \_\_\_\_\_

Business telephone \_\_\_\_\_ Fax number \_\_\_\_\_

Additional contact telephone numbers \_\_\_\_\_

Business address \_\_\_\_\_

City \_\_\_\_\_, State \_\_\_\_\_, Zip code \_\_\_\_\_

Person holding State Contractor's License \_\_\_\_\_

State License number \_\_\_\_\_ License type \_\_\_\_\_ Exp. date: \_\_\_\_\_

If proprietorship, name of owner \_\_\_\_\_

If partnership, names of co-owners \_\_\_\_\_

List below the names of the persons who are authorized to obtain permits for your company, either by telephone or in person \_\_\_\_\_

STATE OF OKLAHOMA

COUNTY OF \_\_\_\_\_

Before me the undersigned, a Notary Public in and for said County and State on this date personally appeared \_\_\_\_\_ known to me to be the same person who executed the foregoing certification and acknowledged to me that he/she has read and understood the same and executed the same as free and voluntary act for the uses and purposes therein set forth.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

MY COMMISSION EXPIRES:

\_\_\_\_\_

NOTARY PUBLIC