

Alarm Permit Application

You're required to complete this application and return it with your renewal payment.

Mail completed application with an attached non-refundable payment *(check or money order)* to: OKC Permits & ID Unit, P.O. Box 268837, OKC, OK 73126-8837

Contact Us

(405) 297-1109 • www.okc.gov/police ocpd.alarmpermits@okc.gov

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New Permit / \$27	Renewal \$17	Update \$0					Permit Numb	er
Alarmed Location								
Occupant/Business Name								
Address/City/State/Zip								
Phone			Email					
Responsible Party (Must be	a person)							
Full Name								
Address/City/State/Zip			-					
Phone			Ema	il				
Contacts (Those listed will b	e contacted in the	e event of alarm ac	tivation. If	you're t	he permit	t holde	er and want to	be contacted, list yourself.)
Contact 1 Name								
Phone 1		cell / work / hor	me Phon	e 2				cell / work / home
Contact 2 Name								
Phone 1		cell / work / hor	me Phon	e 2				cell / work / home
			•					
Additional Information								
Date Installed / Activated			Automat	ic Rese	t ()	Audi	ble	
Special Conditions / Hazards								
		1						
Alarm Company								
Monitored By							-	Not Monitored
							e License #	
Phone 1		Phone			-			
System Type Bur	glary Rol	obery E	mergency	\Box	Fire	\bigcirc	Other	
The undersigned hereby cert	ifies contents of th	nis application are	true and c	orrect;	and I agre	ee if a	permit is issu	ued, I will comply with
all provisions of the City Ordi			yment of al	l fees a	nd fines t	hat ma	ay result from	operations of the
alarm system servicing the a	pove listed premis	es.						

Permit Holder's Signature Printed Name Date