

# Arlington Police Department • Burglar Alarm Permit Application • Residential

**Application will not be processed without an attached check or money order for \$50.00**, made payable to the City of Arlington. **Persons 65 + do not have to pay the permit fee if the permit address is their primary residence.** The permit becomes effective on the date the Police Department receives your completed application, and will be mailed to the Billing Address you provide. **Please print your information clearly.**

**By Mail:**

Alarm Office 04-0101  
Arlington Police Department  
Post Office Box 1065  
Arlington TX 76004-1065

**OR**

**In Person:**

Alarm Office  
Arlington Police Department  
620 W. Division Street  
Arlington TX 76011

817-459-6472

Individual Permit For: <input type="checkbox"/> Single Family Dwelling <input type="checkbox"/> Apartment <input type="checkbox"/> Duplex <input type="checkbox"/> Mobile Home				Type: <input type="checkbox"/> New <input type="checkbox"/> Renewal
Street Address to be Permitted	Apt. #	<b>Arlington</b>	Zip Code	Home Phone
Applicant's Full Name	Date of Birth		Texas Driver's License or State ID #	
Home Address (if different from permit address)	City & State		Zip Code	Date Moved to Permit Address
Billing Address (if different from permit address)	City & State		Zip Code	E-Mail

**NOTE: All correspondence will be mailed to the Billing Address.**

A. Name of Person to Contact in an Emergency	Home Phone	Business Phone
B. Name of Person to Contact in an Emergency	Home Phone	Business Phone
C. Name of Person to Contact in an Emergency	Home Phone	Business Phone

Alarm Company Name	Address (include city and zip code)	Phone
<b>Pets:</b> Number and Type Inside	<b>Pets:</b> Number and Type Outside	
Any Other Pertinent Information About the Location		

**Confidentiality.** Alarm system locations, types of systems, and the names of occupants at permitted locations are confidential information. The Police Department cannot disclose this information to others. See Section 1702.284 of the Texas Occupations Code for further information.

*"The information contained in this application is true and correct as of the date of this application. I will inform the Police Department promptly of any changes. I shall comply will all provisions of the Alarms Chapter of the Code of the City of Arlington and all applicable laws of the State of Texas. I accept responsibility for all fines and fees that may result from the operation of the alarm system for the premises named in this application, and shall pay all costs, expenses, and attorney's fees incurred or paid by the City of Arlington for the collection of such fines or fees."*

Applicant's Signature	Applicant's Name Printed	Date Signed
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**For Office Use Only**

Date Received/Issued	Expiration Date	Permit #
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