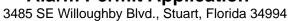


Martin County Tax Collector

Alarm Permit Application





Customer Alarm Informatio	n
Customer Name:	Business Name:
	Apt/Bldg/Suite:
City/State/ZIP:	
First Phone: ()	Second Phone: ()
City/State/ZIP:	
Alarm Type: (Check all that apply)	Burglary Robbery Panic/Personal Assistance Audible Silent
Premise Type:	Residential Commercial Government
Below, list TWO local contacts who can assist emergency personnel, if needed:	
Second Contact Name:	
Primary Phone: ()	Secondary Phone: ()
Third Contact Name:	
Primary Phone: ()	Secondary Phone: ()
Contractor and Monitoring	Company
Contractor/Servicing Company:	Phone: ()
Date system last serviced/installed:	Contact Name (if known):
Mailing Address:	
City/State/ZIP:	
Monitoring Company Name (if different	nt from above):
Phone:	() Contact Name (if known):
Do you have a gate code to your property? If so, please list: List all hazardous materials, their locations in your buildings or on your premises, along with any ANIMALS, including their level of aggressiveness (will the animal attack or bite a stranger):	
PERMIT FEE: \$20.00 Please make check or money order payable to: Martin County Tax Collector.	
	or assistance in completing this permit application, please contact the Martin County Tax Collector 604. Copies of the ordinances may be obtained upon request, or by viewing our web page at http://taxcol.martin.fl.us
Applicant Signature:	
Printed Name:	Date Signed:

YOU MUST NOTIFY THE TAX COLLECTOR IF YOU HAVE ANY CHANGE IN STATUS OR CONTACT INFORMATION!

Mail permit application with payment to: Martin County Tax Collector

Attn: False Alarm 3485 Willoughby Blvd. Stuart, Florida 34994