

ELECTRONIC SYSTEM REGISTRATION DEPARTMENT OF PUBLIC SAFETY P.O. DRAWER 2085 HUNTSVILLE, AL 35804	PRINT OR TYPE		AFFIX PERMIT DECAL# →
	TELE: (256) 427-5621	FAX: (256) 427-5622	TYPE OF PERMIT
			<input type="checkbox"/> INSTALLATION <input type="checkbox"/> CONVERSION

PERMITTEE NAME AND PREMISE ADDRESS					
PERMITTEE NAME (LAST & FIRST OR FULL BUSINESS NAME)					PRINT PERMIT #
STREET #	SUITE/APT	STREET NAME	CITY	ZIP CODE	TELEPHONE #
MAILING ADDRESS IF DIFFERENT FROM ABOVE					FAX #

SYSTEM AND MONITORING COMPANY			
SYSTEM COMPANY NAME (ALSO CONTRACT HOLDER IF DIFFERENT)	AESBL#	AREA CODE	TELEPHONE #
MONITORING COMPANY NAME OR "NONE" IF NOT MONITORED	AESBL#	AREA CODE	TELEPHONE #

SYSTEM TYPE (check all that apply)		PREMISE TYPE	
<input type="checkbox"/> CCTV	<input type="checkbox"/> ROBBERY	<input type="checkbox"/> PANIC	<input type="checkbox"/> ENVIRONMENT
<input type="checkbox"/> ACCESS	<input type="checkbox"/> BURGLARY	<input type="checkbox"/> FIRE	<input type="checkbox"/> OTHER
		<input type="checkbox"/> COMMERCIAL	<input type="checkbox"/> RESIDENTIAL
NATURE OF BUSINESS			

PERSON TO CONTACT		
FIRST CONTACT NAME	LOCAL TELEPHONE #	ALT LOCAL TELEPHONE #
SECOND CONTACT NAME	LOCAL TELEPHONE #	ALT LOCAL TELEPHONE #
THIRD CONTACT NAME	LOCAL TELEPHONE #	ALT LOCAL TELEPHONE #

OWNER OR OPERATOR RESPONSIBLE FOR SYSTEM		
NAME (LAST-FIRST)	LOCAL TELEPHONE #	ALT LOCAL TELEPHONE #
RELATIONSHIP TO SYSTEM <input type="checkbox"/> HOME OWNER <input type="checkbox"/> BUSINESS OWNER <input type="checkbox"/> OTHER: SPECIFY BELOW	SYSTEM COMPANY REPRESENTATIVE	AESBL#

APPLICANT SIGNATURE		
PRINTED NAME OF APPLICANT	SIGNATURE OF APPLICANT	DATE
<small>I CERTIFY THAT ALL STATEMENTS ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.</small>		

PERMIT HOLDER IS RESPONSIBLE TO KEEP SECURITY MANAGEMENT UNIT OFFICE NOTIFIED OF ANY CHANGES OF INFORMATION ON THIS FORM PERMIT IS NOT TRANSFERABLE IN NAME, OWNERSHIP, SYSTEM COMPANY, OR LOCATION	The law requires the System Company to perform the complete registration process, including a full review of equipment and explanation of system use. <u>The System user is required to allow ample time for review and explanation.</u>
IF CONVERSION PRINT OLD PERMIT # BELOW <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>	SPECIAL INFORMATION PLEASE CIRCLE: RESIDENTIAL COMMERCIAL <10,000 SQ FT COMMERCIAL >=10,000 SQ FT
THE SYSTEM COMPANY IS RESPONSIBLE FOR AFFIXING REGISTRATION DECAL ON OR DIRECTLY ADJACENT TO THE MAIN DOOR OF THE SITE.	