

"The Perfect Location for Industrial Development"

TOWN OF MEDLEY, ALARM PERMIT REGISTRATION FORM					
Registered Name of Business □ or Resident □			You must notify your Alarm company of the Valid Permit Number for POLICE RESPONSE.		
					LOCATION OF PROPERTY FOR POLICE TO RESPOND
Address:			Permit No.		
<u>City:</u>	State:		Date:	Clerk Initials:	
Zip:	Phone:		Check #	Amount: \$	
			Permit Fee	Amount: \$	
Mailing Address (if not the same as above)			Administration Fee	Amount: \$	
Address:			Late Fee	Amount: \$	
City & State:				TOTAL \$	
Zip:		Computer Entry by	initials:		
BUSINESS APPLICANTS ONLY: NAME, ADDRESS AND PHONE OF LANDLORD, IF ANY.					
Name:		Address:	<u>Address:</u>		
City & St			ute:		
Phone:		Zip:			
EMERGENCY LISTING: LIST I	NDIVIDUALS TO CO	NTACT IN (CASE OF AN EMERG	ENCY TO SHUT OFF ALARM	
Name:			Phone:		
Address:			Other phone:		
City, State & Zip:					
Name:			Phone:		
Address:	······································	Other phone:			
City, State & Zip:			·		
Name of Alarm Company Servicing Alarm System: MAXIMUM SECURITY, INC.					
Address: 12108 SW 117 CT, MIAMI, FL 331			Phone: (305) 253-5162		
Name of Alarm Company Monitoring Alarm System: CENTRAL ALARM CONTROL, INC.					
Address: 13973 SW 140 ST, MIAMI, FL 331			Phone: (305) 238-0800		
Name of Person Completing Application:					
Address:			Phone:		
First time Alarm Permit Registration Fee \$50.00 for each Alarm, Renewal fee \$35.00 for each Alarm.					
Mail or deliver your completed Application with the above fee to the Permit Department at the above address. Your validated copy will be returned with the new					

Mail or deliver your completed Application with the above fee to the Permit Department at the above address. Your validated copy will be returned with the new permit sticker to be placed on the top right hand corner of your front door. Make your check or money order payable to: Town of Medley.