



# Residential Alarm Permit Application

## HITCHCOCK POLICE DEPARTMENT



6815 2<sup>nd</sup> Street  
Hitchcock, Texas 77563  
Office: 409-986-5559 – Fax: 409-986-9246

**A NON-REFUNDABLE \$25.00 PERMIT/REGISTRATION FEE** MUST BE SUBMITTED WITH EACH PERMIT/REGISTRATION FORM. \*see pro-rated fees on instruction page\* **MAKE CHECK OR MONEY ORDER PAYABLE TO CITY OF HITCHCOCK.**

Type of Alarm (check all that apply): Burglar  Panic/Holdup  Robbery  Fire

A.) Residential Alarm User Information:

**Alarm User Name:** \_\_\_\_\_

B.) Residential alarm users must complete:

**Alarm Location:** \_\_\_\_\_  
Street Number Street Prefix Street Name Suite/Apt. No.

( ) \_\_\_\_\_ ( ) \_\_\_\_\_ ( ) \_\_\_\_\_  
Home Phone Work Phone Cell Phone or Pager Email Address

C.) Mailing Address: (If different from Location of Alarm System)

\_\_\_\_\_

D.) **1st Contact Name:** \_\_\_\_\_

( ) \_\_\_\_\_ ( ) \_\_\_\_\_ ( ) \_\_\_\_\_  
Home Phone First Name Work Phone Last Name Cell Phone or Pager

**2nd Contact Name:** \_\_\_\_\_

( ) \_\_\_\_\_ ( ) \_\_\_\_\_ ( ) \_\_\_\_\_  
Home Phone First Name Work Phone Last Name Cell Phone or Pager

E.) Alarm Install/Service Company: \_\_\_\_\_

Date of Install/Transfer: \_\_\_\_\_ Contact Person: \_\_\_\_\_ Phone ( ) \_\_\_\_\_

F.) Alarm Monitoring Company: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone ( ) \_\_\_\_\_

G.) Special Conditions: (List hazardous conditions/materials, guard dogs, security personnel, weapons, directions to alarm site, etc.)

\_\_\_\_\_

Alarm permits are not intended to, and do not create a contract, duty or obligation, either expressed or implied. Any and all liability and consequential damage resulting from the failure to respond to a notification is hereby disclaimed and governmental immunity as provided by law is retained. By applying for an alarm permit, the permit holder acknowledges that response may be influenced by factors such as the availability of police or fire units, priority of calls, weather conditions, traffic conditions, emergency conditions, staffing levels, and prior response history.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**\*Instruction for Completion of Alarm User Permit/Registration Form is on the back**

Permit Number
Official Use Only

# Instructions for Completion of Alarm User Permit/Registration Form

**Section A** – To be completed by Residential alarm users

**Alarm User Name:** First and last name of the residential alarm user. List both spouses, if applicable.

**Section B** – To be completed by Residential alarm users.

**Alarm Location:** Complete street address, including directional prefixes, where the alarm is located. Indicate the home, work and cell or pager (cell is preferable) numbers of the alarm user, as well as one email address where the alarm user can receive correspondence. If no email address is available, leave blank.

**Section C** – To be completed by Residential

**Mailing Address:** Indicate separate mailing address if different from the alarm location.

**Section D** – To be completed by Residential

**Contact Information:** Contacts are persons, who should be contacted in the event of an alarm, and who are willing and have agreed to receive notification of an alarm activation at any time, respond to the alarm site within 20 minutes, grant access to the alarm site and deactivate the alarm system if such becomes necessary. Two separate contact persons are required. Provide home, work and cell or pager (cell is preferable) numbers, as well as email addresses of contacts.

**Section E** – To be completed by Residential

**Alarm Install/Service Company:** List the name of the company that either installed or services your alarm system. Include the alarm company's license number, contact person and the best phone number at which to reach this individual. Check your contract or contact your alarm company for the information.

**Section F** – To be completed by Residential

**Alarm Monitoring Company:** List the name, license number, contact person and phone number of the company that monitors your alarm system and requests public safety dispatch on your behalf. If same as install or service company, leave blank.

**Section G** – To be completed by Residential

**Special Conditions:** Indicate any unusual circumstances that should be considered when responding to an alarm at the permitted alarm address such as: handicapped person(s), guard dog on site, hazardous conditions/materials, security personnel, weapons, directions to alarm site, etc.

**Signature Line:** A responsible residential alarm user or the president, owner, partner or local manager of a commercial alarm user must sign this form.

## Pro-Rated Fees: New Installs

January	\$25.00	February	\$22.88	March	\$20.80	April	\$18.72
May	\$16.64	June	\$14.56	July	\$12.48	August	\$10.40
September	\$8.32	October	\$6.24	November	\$4.16	December	\$2.08

Updated 7.6.22