

**CITY OF LAWRENCE, KANSAS
ALARM SYSTEM PERMIT APPLICATION**

Application is hereby made for a permit to possess, use or install an operative alarm system in accordance with the provisions of the City Code of Lawrence, and in this connection, the following information is submitted. The appropriate fee is enclosed with this application. *In the event any information listed below should change, such changes shall be reported immediately in writing to the Crime Prevention Office, Lawrence Police Department.*

Full Name: _____

Mailing Address: _____

Street Address: _____

Telephone No.(s): _____

List three responsible persons to contact in case of emergency.

IMPORTANT: WE NEED THREE CONTACT PERSONS LOCATED WITHIN THE CITY OF LAWRENCE, KANSAS IN ORDER TO PROCESS YOUR APPLICATION. IN THE EVENT OF ANY CHANGES TO THE CONTACT NAMES LISTED BELOW, SUPPLY AN UPDATED WRITTEN LIST TO: *CRIME PREVENTION OFFICER, LAWRENCE POLICE DEPARTMENT, 111 EAST 11TH STREET, LAWRENCE, KANSAS 66044.*

| Name (s) | Address | Zip Code | Phone |
|----------|---------|----------|-------|
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TYPE OF PERMIT AND AMOUNT OF FEE ENCLOSED

Robbery and/or Burglary - \$6.25 G Fire Only - \$6.25 G Robbery and/Burglary and Fire - \$12.50 G

Name of Alarm Company: _____

Alarm Co. Address _____ Alarm Co. Phone No.(____) _____

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

EXECUTED AT LAWRENCE, KANSAS, THIS _____ DAY OF _____ 19 _____

Signature of Applicant

Printed/Typed Name of Applicant

Received this _____ day of _____, 19 _____
Administrative Services

Received this _____ day of _____, 19 _____
Crime Prevention Officer

Received this _____ day of _____, 19 _____
Chief of Police

Return completed application and fee to: Administrative Services
City of Lawrence
P.O. Box 708
Lawrence, Kansas 66044

