

## Hanover County Security Alarm Permit Application

### Protected Premise Information:

Name of the Business or Protected Premise: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone # \_\_\_\_\_ Fax # \_\_\_\_\_ Email \_\_\_\_\_  
Days and Hours Business Operated \_\_\_\_\_

### Owner and/Operator of the Security System:

Owner/Tenant Name: \_\_\_\_\_ Telephone # \_\_\_\_\_  
Address: \_\_\_\_\_  
Federal Tax ID #: \_\_\_\_\_

### Person Applying for the Permit:

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Relationship or official position in business \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone # \_\_\_\_\_ Fax # \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Security Alarm System Information:

Type of System: \_\_\_\_\_ Installation Date: \_\_\_\_\_  
Manufacturer: \_\_\_\_\_ Installed By: \_\_\_\_\_  
Audible \_\_\_\_\_ Silent \_\_\_\_\_ Motion \_\_\_\_\_ Other \_\_\_\_\_  
Is the Alarm System Monitored by an Alarm Company: \_\_\_\_\_ or Direct Dial: \_\_\_\_\_

### Alarm Monitoring Company Information:

Name of Company: \_\_\_\_\_ Telephone # \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### Key Holder Contact Information:

Name: \_\_\_\_\_ Home Telephone # \_\_\_\_\_  
Pager #: \_\_\_\_\_ Mobile # \_\_\_\_\_

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### Hanover County Use Only:

Date Received: \_\_\_\_\_ Approved By: \_\_\_\_\_ Permit # \_\_\_\_\_  
Date Approved: \_\_\_\_\_  
Comments: \_\_\_\_\_  
GPIN(S) \_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_