

City of Apache Junction Alarm User Permit Application 300 E. Superstition Blvd, Apache Junction, AZ 85219 Phone: 480-982-8260 Fax: 480-671-5489



	Permit #	
Alarm Subscriber and/or Business Na	ame:(Last)	(First)
Address of Alarm:		
Mailing Address:		
Phone Number of alarmed location: (_))	
Is alarmed location a Business or Res	sidence (Please circle one)	
Business or Residence Owner Name:		
Who should be contacted in the event Name	t of alarm: (Other than owne <u>Day Phone</u>	er) <u>Night Phone</u>
1		
2		
Dogs, Hazards, Special comments Re	garding Premises:	
Name of Alarm Company:		
Mailing Address:		
(Cit	ty) (Stat	e) (Zip)
Name of Monitoring Company:		
Mailing Address:		
(City)) (Stat	e) (Zip)
Type of Alarm System: (Circle one)	Burglary Holdup/Armed Robbery Panic	Audible or Silent Audible or Silent Audible or Silent
Date or Alarm Installation	Date of Last Alarm System Inspection	
Applicant Signature:		Date:
Effective Date:	Expiration [Date: