



City of Lawrence

Alarm Business Permit Application

BUSINESS INFORMATION				
Business Name:			State Sales Tax Number:	
Business Address	Street:	City:	State:	Zip:
Mailing Address	Street:	City:	State:	Zip:
Business Phone:	Preferred Phone:	E-Mail Address:		
Brief Description of the Nature of the Business:				
PARENT COMPANY (If Applicable)				
Name of Parent Company:				
Company Address	Street:	City:	State:	Zip:
Mailing Address	Street:	City:	State:	Zip:
Business Phone:	Preferred Phone:	E-Mail Address:		
EMERGENCY CONTACTS (Must Provide Three)				
Last Name:		First Name:	Middle Name:	Phone Number:
Home Address	Street:	City:	State:	Zip:
Last Name:		First Name:	Middle Name:	Phone Number:
Home Address	Street:	City:	State:	Zip:
Last Name:		First Name:	Middle Name:	Phone Number:
Home Address	Street:	City:	State:	Zip:

Application is hereby made for a permit to engage in or operate an ALARM BUSINESS in accordance with the provisions of Chapter 13 Article 8 of the Lawrence City Code and in the connection, the above information is submitted.

Note: Electrical contractors licensed under Section 5-431 are exempt from alarm company license fee, but shall register with the City Clerk.

PLEASE INCLUDE: \$300.00 fee first year or \$150.00 renewal fee per year (expires December 31st)
 \$75.00 additional late charge for 60 day delinquency

 APPLICANT'S NAME (Printed)

 APPLICANT'S SIGNATURE

 TODAY'S DATE

ALARM BUSINESS PERMIT APPLICATION APPROVAL
(For Office Use Only)

Fee Paid: Yes No

Permit approved on: ____/____/____

City Clerk