



Date of Expiration _____	Please mail Application to:
Alarm Permit Number _____	Chikaming Township
Date Issued _____	Attn: Alarm Officer
Amount Paid _____	P.O. Box 40
New <input type="checkbox"/> Renewal <input type="checkbox"/> Change <input type="checkbox"/>	Harbert, Michigan 49115

CHIKAMING TOWNSHIP ALARM PERMIT APPLICATION

1. Address of Alarmed Location _____

City, State, Zip Code _____

Phone Number at Alarmed Location _____

2. Business or Residence Owner _____

Mailing Address _____ Attn _____

City, State, Zip Code _____

Day Phone _____ Night Phone _____ Cell _____

Email address: _____

3. Name of Alarm Monitoring Company _____

Address _____

City, State, Zip Code _____

Monitoring Company Phone Number _____

4. You must list at least two persons who will respond, who reside locally and are able to and have agreed to receive notification of an alarm. These persons must also have a key to the premises and be able to reset a malfunctioning alarm and secure the premises.

Name	Day Phone	Night Phone	Cellphone
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A. _____

B. _____

5. Type of Alarm: Robbery Intrusion Panic Burglary Fire

6. Model/Type _____

7. Date _____ Applicant Signature _____

Upon approval, a sticker with your permit number will be issued to you and must be posted on a window or door clearly visible at the front entrance to your home or business.

Keep the bottom copy for your records.

You must enclose a \$50 permit registration fee or \$25 renewal fee with the application.

Make Checks Payable to: Chikaming Township

OFFICE USE ONLY

ISSUED BY: _____