SMITH COUNTY SHERIFF'S OFFICE

ALARM PERMIT APPLICATION

227 N. SPRING AVE., TYLER, TX 75702		SCSO Permit	SCSO Permit #		
			Residential		
	dent or <u>Business</u> Name:		Business		
PHYSICAL ADDRESS OF ALARM SITE:		C:L. Ct.t. 7:			
		□ Land Line □ Cellular ↑ □ Mailing			
DIRECTIONS	FROM LOOP 323 TO ALARM SIT	ГЕ:			
SPECIAL INS	TRUCTIONS TO RESPONDING OF	FFICERS:			
DESCRIPTIO	N OF ALARM SYSTEM: Doe	es your alarm have a silent panic, hold-up or du	uress alarm? 🗆 Y	/ES □ NO	
Does your ala	rm system;have an outside sire	en? \square YES \square NO silence itself within 20	O minutes? 🗆 Y	ES 🗆 NO	
Does your ala	rm send signals;to an alarm dispa	atch center? 🗆 YES 🗆 NO to anyone via te	ext/email? 🗆 Y	'ES □ NO	
		rm with weapons visible may cause SCSO the if you are arriving at a business alarm. N	•	-	
-	·	<u> </u>	-		
Contact list:		Alarm Dispatch No.:		□ N/A	
		Phone No.			
		Phone No.			
	3	Phone No			
SECTIONS 2.01	8 – WHEN PERMIT MAY BE REVOKED:				
•	it may be revoked upon the occurrence				
	· · · · · · · · · · · · · · · · · · ·	yment in full to Smith County for any fees assessed			
		date the Sheriff has mailed notice to the permit hol	der that such fees	are due	
	nd owing. The normit holder accrues more than n	ine (9) FALSE ALARMS during any twelve (12) mont	h neriod over and	d ahove the	
		twelve (12) month period. After the reinstatement	-		
	- · · ·	nit holder accrues more than three (3) false alarms			
re	emainder of any twelve (12) month per	iod.	J		
<u>The Al</u>	<u>arm Permit fee is \$25.00</u>	<u>0 made payable to the Smith Co</u>	<u>unty Treas</u>	<u>urer.</u>	
	Mail To: SMITH COUNTY SE		TYLER, TX		
		aking the application for permit, acknowledging			
• •	_	acy of the information given on the application,	_		
	•	er, and, if such person making the application w	vill not be the pe	ermit	
holder, certify	ying that he/she is authorized to act	t for the intended permit holder.			
APPLICANT SIGNATURE:		DATE:			
EMAIL ADDRE	ESS OF APPLICANT:				
FOR OFFICIAL	. USE ONLY	Rec'd	Ву:		
PERMIT RECEIVED:		CHECK/M.O.#			
RECEIPT #:		EXPIRATION DATE:			
COMMENTS:					