



FLORENCE POLICE DEPARTMENT

425 N. Pinal St. / P.O. Box 988 Florence, AZ 85132

Bus: (520) 868-7681 • Fax: (520) 868-0158

Daniel Hughes, Chief of Police

ALARM USER REGISTRATION

ALARM LOCATION INFORMATION (Please Print Clearly)

Name of Residence or Business (_____) _____
Location Phone Number

Alarm Address: _____
(one address only) Street Address Suite/Apt/Unit #

City State Zip Code

TYPE: Residence: ____ Business: ____ Normal Hours/Days _____ Cleaning Crew ____

OBSTACLES OR HAZARDS

Dog(s) ____ Chemicals ____ Firearms ____ Explosives ____ Fenced Compound ____ Gate Code ____

RESPONSIBLE KEYHOLDERS 2 responsible persons who will respond to alarms & assist Police Dept to determine alarm cause & secure premises

Key holder 1 Key holder 2 Security Personnel

Name: _____

Day Telephone: (____) _____ (____) _____ (____) _____

Night/Cell Phone: (____) _____ (____) _____ (____) _____

ALTERNATE MAILING ADDRESS

Attn: _____ Part-Time Resident? Yes ____ No ____

Address: _____

City: _____ State: _____ Zip: _____

Owner: _____ (____) _____ (____) _____

Alternate Phone

Alternate Cell

ALARM COMPANY AND/OR MONITORING COMPANY

Alarm Installation/Service Company

Alarm Monitoring Company

Company Name: _____

Phone Number: (____) _____ (____) _____

Forms can be mailed to Florence Police Department. If you have any questions please contact the Communications Supervisor at 520-868-7656.

Applicant Signature

Date

MUST BE RENEWED EVERY YEAR ON JANUARY 1ST.