



SACRAMENTO COUNTY SHERIFF'S DEPARTMENT
RANCHO CORDOVA POLICE DEPARTMENT
ALARM ORDINANCE BUREAU
 (916) 874-4616
 (916) 874-8101-FAX



PERMIT NUMBER
CHECK#
AMOUNT

ALARM PERMIT APPLICATION

INCOMPLETE FORMS WILL NOT BE PROCESSED. Required Fields:

Sacramento County Rancho Cordova

Permit Type: Residential Business Government School

Business Name (If applicable): _____

Applicant Last Name: _____ First: _____ MI: _____

Drivers License # or ID #: _____ State: _____
 (NOT REQUIRED FOR THE INCORPORATED CITY OF RANCHO CORDOVA)

Date of Birth: _____
 (NOT REQUIRED FOR THE INCORPORATED CITY OF RANCHO CORDOVA)
 Month Day Year

Site Address Number: _____ Street: _____ Suite: _____

Site City: _____ State: _____ Zip: _____

Mailing Address # (if different): _____ Street: _____ Suite: _____

Mailing City: _____ State: _____ Zip: _____

Phone 1: Area Code Number
 () -

Phone 2: Area Code Number
 () -

Phone 3: Area Code Number
 () -

e-mail (optional): _____

Monitoring Alarm Company: _____ Servicing Alarm Company: _____

<p>NON-REFUNDABLE PERMIT FEE</p> <p>NEW.....\$ 50 if obtained within 15 days of installation/placement into service \$ 75 if obtained after 15 days of installation/placement into service \$325 if obtained after 45 days of installation/placement into service</p> <p>RENEWAL.....\$ 45 Every two years (THE INCORPORATED CITY OF RANCHO CORDOVA HAS NO RENEWAL)</p> <p>\$53 service charge assessed on all returned checks.</p>	<p>MAIL APPLICATION AND PAYMENT TO:</p> <p>SHERIFF'S ALARM BUREAU P O Box 988 Sacramento, CA 95812-0988</p> <p>Website: www.sacsheriff.com e-mail: alarms@sacsheriff.com</p>
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A COPY OF THE SACRAMENTO COUNTY ALARM ORDINANCE IS AVAILABLE AT THE SHERIFF'S DEPARTMENT WEBSITE - www.sacsheriff.com. A COPY OF THE CITY OF RANCHO CORDOVA ALARM ORDINANCE CAN BE OBTAINED BY CALLING (916) 851-8700.

SECTION 9.20/010 STATES THAT IT IS UNLAWFUL FOR ANY PERSON TO KNOWINGLY FALSIFY OR CONCEAL ANY FACT(S) OR MAKE FALSE OR FRAUDULENT STATEMENT(S) IN ANY MANNER WITHIN THE JURISDICTION OF ANY DEPARTMENT OF THE COUNTY.

I ACCEPT RESPONSIBILITY FOR PAYMENT OF ALL FEES AND FINES THAT MAY RESULT FROM THE OPERATION OF THE ALARM SYSTEM SERVICING THE ABOVE PREMISES UNTIL SUCH TIME I NOTIFY THE SHERIFF'S ALARM BUREAU OF REMOVAL OF THE SYSTEM AND/OR RELOCATION. I AM ALSO RESPONSIBLE FOR NOTIFICATION TO THE SHERIFF'S DEPARTMENT OF ANY ALARM COMPANY CHANGES WITHIN 10 DAYS.

APPLICANT'S SIGNATURE	DATE
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