

CITY OF BREA, Administrative Services Department Accounts Receivable 1 Civic Center Circle, Brea, CA 92821 Phone: 714-990-7678 | Fax: 714-671-4484 acctsreceivable@cityofbrea.net

ALARM PERMIT APPLICATION

The City of Brea's Alarm Ordinance requires all alarm users to obtain an annual alarm permit (City Ordinance Chapter 8.38) prior to operating an alarm system. The permit is valid from date of issuance to June 30th. For more information and the false alarm fee schedule, please visit our website at <u>cityofbrea.net</u>.

Please indicate one: RESIDENTIAL COMMERCIAL	
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Please indicate one:
New Permit
Renewal (Permit #_____)

Applicant Name (Resident or Business Name)	Residence or Business Phone
Site Address	
Mailing Address (If different from Site Address)	
Email Address	
Primary (or additional) Contact Name	Primary (or additional) Phone
	,
Alarm Company	Alarm Company 24-hr Phone
, tain company	
Applicant Signature	Date
, ipplicant organization	Bato

The alarm permit fee is **\$25**. Please make checks payable to the **CITY OF BREA**.

If you prefer to pay by credit card, we accept Visa, MasterCard and Discover only. Please complete the card info below. The card information will be destroyed after processing.

You may return the completed form and payment by mail, fax, or email (as noted above).

FOR DEPARTMENT USE ONLY		
Permit #: Amount Paid: Date of Issuance:	Period(s) Paid for: Date Paid:	
Paid by: Credit Card # Check	# □ Cash	
Cardholder Signature:/ authorize the fee to be charged to my ca	Name on Card	
Card Account No:	Exp. Date: 3-digit Code:	