

DPT LABORATORIES LTD
YASIR HALSOON
ATTN: OWNER/ACCOUNTS PAYABLE
318 MCCULLOUGH AVE
SAN ANTONIO, TX 78215

DATE: 06/02/2023
PERMIT NUMBER: 0003151
ALARM LOCATION: 200 E JOSEPHINE

Dear Permit Holder:

Our records indicate your alarm permit expires in the next thirty (30) days prior to expiration date below. Please return this form with your payment to the Please update the contact information below. The Alarms Office only accepts payments in the form of check, credit card or money order. Please return form with CANCEL on it if you no longer have an alarm. Permits are valid for 12 months, from the date of issuance.

ALL FEES/FINES MUST BE PAID *PRIOR* TO THE RENEWAL OF THE ALARM PERMIT.

The Permit fee for residential alarm sites for a person 65 years or older is \$30. A Permit fee for a residential alarm site is \$40, and a Commercial alarm site is \$100. Make checks payable to the City Of San Antonio. For questions, please call (210) 207-8282.

AMOUNT DUE: \$100.00

PAYMENT DUE DATE (EXPIRATION DATE): 07/31/2023

PERMIT TYPE: Commercial

PERMIT STATUS: Active

PERMIT HOLDER NAME: _____ **BUSINESS** _____

STATE w/Drivers License Number & DOB _____ **(ID purposes) ALARM Co.** _____

ALARM ADD LOCATION: _____ **Gate Code** _____ **CITY:** _____ **ZIP:** _____

BILLING ADDRESS: _____ **CITY:** _____ **ZIP:** _____

NIGHT (HOME or CELL) PHONE: (____) _____

DAY (WORK) PHONE: (____) _____ **E-Mail** _____

CONTACT #1 NAME: _____

NIGHT (HOME or CELL) PHONE: (____) _____

DAY (WORK) PHONE: (____) _____

CONTACT #2 NAME: _____

NIGHT (HOME) PHONE: (____) _____

DAY (WORK) PHONE: (____) _____

Signature

DATE

San Antonio Office
1315 S. Santa Rosa
San Antonio, Texas 78207

DPT LABORATORIES LTD
YASIR HALSOON
ATTN: OWNER/ACCOUNTS PAYABLE
318 MCCULLOUGH AVE
SAN ANTONIO TX 78215

BLANCA QUESZADA
BLANCA QUESZADA
OR CURRENT ALARM USER
430 ORCHARD WILLOW
SAN ANTONIO , TX 78245

PERMIT NO. : 10022547
PERMIT SITE : BLANCA QUESZADA
STATEMENT DATE : 06/07/2023
PAYMENT DUE UPON RECEIPT
PERMIT TYPE : Residential

CHARGES SINCE LAST STATEMENT (05/03/2023)

DATE OF SERVICE	CALL NO.	INVOICE NO.	DESCRIPTION	AMOUNT
SUBTOTAL:				\$0.00

PAYMENTS SINCE LAST STATEMENT (05/03/2023)

DATE PAID	DESCRIPTION	AMOUNT
SUBTOTAL:		\$0.00

Balance Forward: \$165.00

Charges: \$0.00

Payments: \$0.00

TOTAL DUE: \$165.00

RETURN THIS PORTION WITH YOUR PAYMENT

STATEMENT DATE

06/07/2023

DUE UPON RECEIPT

TOTAL DUE

\$165.00

PERMIT NUMBER : 10022547

AMOUNT OF YOUR PAYMENT :

**BLANCA QUESZADA
430 ORCHARD WILLOW
SAN ANTONIO, TX 78245**

San Antonio Office
1315 S. Santa Rosa
San Antonio, Texas 78207

BLANCA QUESZADA
BLANCA QUESZADA
OR CURRENT ALARM USER
430 ORCHARD WILLOW
SAN ANTONIO , TX 78245

JAY ELLISON INSURANCE TRUST
JAMES ELLISON
ATTN: ACCOUNTS PAYABLE
4242 BROADWAY ST APT 1602
SAN ANTONIO, TX 78209-6456

PERMIT NO. : 9961787
PERMIT SITE : JAY ELLISON
INSURANCE TRUST
STATEMENT DATE : 06/07/2023
PAYMENT DUE UPON RECEIPT
PERMIT TYPE : Commercial

CHARGES SINCE LAST STATEMENT (05/03/2023)

DATE OF SERVICE	CALL NO.	INVOICE NO.	DESCRIPTION	AMOUNT
SUBTOTAL:				\$0.00

PAYMENTS SINCE LAST STATEMENT (05/03/2023)

DATE PAID	DESCRIPTION	AMOUNT
SUBTOTAL:		\$0.00
Balance Forward:		\$125.00
Charges:		\$0.00
Payments:		\$0.00
TOTAL DUE:		\$125.00

RETURN THIS PORTION WITH YOUR PAYMENT

STATEMENT DATE
06/07/2023

PERMIT NUMBER : 9961787

DUE UPON RECEIPT

AMOUNT OF YOUR PAYMENT :

TOTAL DUE
\$125.00

**JAY ELLISON INSURANCE TRUST
219 W SUNSET
SAN ANTONIO, TX 78209-6456**

San Antonio
Office
1315 S. Santa
San Antonio, TX 78207

JAY ELLISON INSURANCE TRUST
JAMES ELLISON
ATTN: ACCOUNTS PAYABLE
4242 BROADWAY ST APT 1602
SAN ANTONIO, TX 78209-6456

HECTOR GOMEZ

OR CURRENT RESIDENT
363 HATCHER AVE
SAN ANTONIO, TX 78223

PERMIT NO. : 9997024
PERMIT SITE : HECTOR GOMEZ
STATEMENT DATE : 06/07/2023
PAYMENT DUE UPON RECEIPT
PERMIT TYPE : Residential

CHARGES SINCE LAST STATEMENT (05/03/2023)

DATE OF SERVICE	CALL NO.	INVOICE NO.	DESCRIPTION	AMOUNT
SUBTOTAL:				\$0.00

PAYMENTS SINCE LAST STATEMENT (05/03/2023)

DATE PAID	DESCRIPTION	AMOUNT
SUBTOTAL:		\$0.00

Balance Forward: \$115.00

Charges: \$0.00

Payments: \$0.00

TOTAL DUE: \$115.00

RETURN THIS PORTION WITH YOUR PAYMENT

STATEMENT DATE

06/07/2023

DUE UPON RECEIPT

TOTAL DUE

\$115.00

PERMIT NUMBER : 9997024

AMOUNT OF YOUR PAYMENT :

**HECTOR GOMEZ
363 HATCHER
SAN ANTONIO, TX 78223**

San Antonio
Office
1315 S. Santa Rosa
San Antonio, TX 78207

HECTOR GOMEZ

OR CURRENT RESIDENT
363 HATCHER AVE
SAN ANTONIO, TX 78223

DARRYN CLARK
OR CURRENT RESIDENT
2500 TANGLEWILDE ST 306
HOUSTON, TX 77063

DATE: 06/02/2023
PERMIT NUMBER: 10025562
ALARM LOCATION: 262 BOGLE

Dear Permit Holder:

Our records indicate your alarm permit expires in the next thirty (30) days prior to expiration date below. Please return this form with your payment to the . Please update the contact information below. The Alarms Office only accepts payments in the form of check, credit card or money order. Please return form with CANCEL on it if you no longer have an alarm. Permits are valid for 12 months, from the date of issuance.

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AMOUNT DUE: \$40.00

PAYMENT DUE DATE (EXPIRATION DATE): 07/31/2023

PERMIT TYPE: Police Residential

PERMIT STATUS: Active

PERMIT HOLDER NAME: _____ **BUSINESS** _____

STATE w/Drivers License Number & DOB) _____ **(ID purposes) ALARM Co.** _____

ALARM ADD LOCATION: _____ **Gate Code** _____ **CITY:** _____ **ZIP:** _____

BILLING ADDRESS: _____ **CITY:** _____ **ZIP:** _____

NIGHT (HOME or CELL) PHONE: (____) _____

DAY (WORK) PHONE: (____) _____ **E-Mail** _____

CONTACT #1 NAME: _____

NIGHT (HOME or CELL) PHONE: (____) _____

DAY (WORK) PHONE: (____) _____

CONTACT #2 NAME: _____

NIGHT (HOME) PHONE: (____) _____

DAY (WORK) PHONE: (____) _____

Signature

DATE

San Antonio
Office
1315 S. Santa Rosa
San Antonio, Texas 78207

DARRYN CLARK
OR CURRENT RESIDENT
2500 TANGLEWILDE ST 306
HOUSTON TX 77063

LYDIA BOSQUEZ
OR CURRENT RESIDENT
25110 FLAMING ARROW
SAN ANTONIO, TX 78258

DATE: 06/02/2023
PERMIT NUMBER: 9997515
ALARM LOCATION: 25110 FLAMING ARROW

Dear Permit Holder:

Our records indicate your alarm permit expires in the next thirty (30) days prior to expiration date below. Please return this form with your payment to the Office, 315 S. Santa Rosa St. , San Antonio, Texas 78207. Please update the contact information below. The Alarms Office only accepts payments in the form of check, credit card or money order. Please return form with CANCEL on it if you no longer have an alarm. Permits are valid for 12 months, from the date of issuance.

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AMOUNT DUE: \$30.00

PAYMENT DUE DATE (EXPIRATION DATE): 07/31/2023

PERMIT TYPE: Police Senior

PERMIT STATUS: Active

PERMIT HOLDER NAME: _____ **BUSINESS** _____

STATE w/Drivers License Number & DOB) _____ **(ID purposes) ALARM Co.** _____

ALARM ADD LOCATION: _____ **Gate Code** _____ **CITY:** _____ **ZIP:** _____

BILLING ADDRESS: _____ **CITY:** _____ **ZIP:** _____

NIGHT (HOME or CELL) PHONE: (____) _____

DAY (WORK) PHONE: (____) _____ **E-Mail** _____

CONTACT #1 NAME: _____

NIGHT (HOME or CELL) PHONE: (____) _____

DAY (WORK) PHONE: (____) _____

CONTACT #2 NAME: _____

NIGHT (HOME) PHONE: (____) _____

DAY (WORK) PHONE: (____) _____

Signature

DATE

San Antonio
Office
1315 S. Santa Rosa
San Antonio, Texas 78207

LYDIA BOSQUEZ
OR CURRENT RESIDENT
25110 FLAMING ARROW
SAN ANTONIO TX 78258