## LAFAYETTE CONSOLIDATED GOVERNMENT ALARM USER PERMIT APPLICATION

<u>INSTRUCTIONS:</u> You must fill out this application with the twenty-dollar (\$20.00) permit fee. Make all checks payable to the Lafayette City-Parish Consolidated Government and mail to Lafayette Police Department, Alarm/Permit Section, P.O. Box 4308 Lafayette, Louisiana 70502 or bring to police headquarters at 900 East University, Lafayette, Louisiana.

NOTE: The operation of an emergency alarm system without the required permit will subject you to a fine up to \$250.00.

## PLEASE PRINT OR TYPE

Complete this section if alarm is installed in a business
Name of business
Representative applying/
Driver's License Number: Social Security Number:
Physical Address:
(Suite Number & Name) Mailing Address:
(P.O. Box, Street Number & Name)
Telephone Number:/ Signature: Signature:
Complete this section if alarm is installed in a residence
Name of resident(s):
Driver's License Number: Social Security Number:
Physical Address:(Street Number)
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Mailing Address:(P.O. Box, Street Number & Name)
Telephone Number:/ Signature Signature
Home Work
Business and Residence Complete this section
The alarm system being registered is:  New Existing Installation Date
Name and address of alarm company that you purchased your system from: PROTECT AMERICA, INC.
5100 N. IH-35, SUITE B ROUND ROCK, TX 78681
Alarm Company Telephone Number:(800) 951-5111 State License Number F492
Name and address of person(s) and company who installed your alarm system: <u>SELF_INSTALLED_WIRELESS</u>
Installer's Telephone Number: State License Number N/A
Name and address of monitoring company (if any) <u>CRITICOM</u>
11130 HOLDER ST SILTE 200 CYPRESS CA 90630 Phone Number (800)482-9800

NOTE: A separate Alarm permit is required for each alarm operated with the City of Lafayette. Example - If your company has two locations with alarms each must have an individual alarm permit, two buildings at the same address with alarms one permit.

(Website Application)