

Alarm Permit Information Form

The following is the information needed to obtain an Alarm Permit from the City of Lynchburg for your monitored alarm system:

You can Mail, Fax or Email this form to: Emergency Communications, Attn: Amy Lowe, 3621 Candler's Mountain Rd, Lynchburg, VA, 24502.

Phone: 434-455-4290, Fax: 434-847-2541, Email: amy.lowe@lynchburgva.gov

PLEASE FILL IN ALL INFORMATION

Business or Resident Full Name: _____

Business or Resident Address: _____

Zip Code: _____

Mailing Address: (if different from above) _____

Zip Code: _____

Business or Resident Phone #: _____ - _____ - _____

If Business, Please circle either Small or Industrial (Small = no more than 2,000 sq.ft. or 5 employees)

If Business, list hours of operation: _____

Alarm Installation Co.: PROTECT AMERICA, INC. / ALARM USER INSTALLED WIRELESS

Alarm Monitoring Co.: CRITICOM MONITORING SERVICES

Telephone # to Monitoring Co : 800 - 482 - 9800

Alarm Type: X Police _____ Fire _____ Medical _____

2 Emergency Contacts: (This can be the keyholders you listed w/your Alarm Company)

Name: _____ Phone: _____

Name: _____ Phone: _____

Please allow 7-10 business days for your Alarm Application to arrive in the Mail