

Alarm Permit Modification Form

Alarm Permit # _____

Please UPDATE any information below that has CHANGED from you original application.

Name of Business or Resident _____

Address of Alarm Location _____

Mailing Address if Different _____ Date of Birth (If Resident) _____

Phone # of Business or Residence _____ Cell # _____

Monitoring Company and Phone # _____

Responsible Alarm Contacts:

#1 - Name _____ Phone #1 _____ Phone #2 _____

#2 - Name _____ Phone #1 _____ Phone #2 _____

#3 - Name _____ Phone #1 _____ Phone #2 _____

List above the responsible persons who can respond to the alarm after notification and are knowledgeable in the basic operation of the alarm system, and are authorized and able to gain entry and secure the premise if required.

Signature _____ Date _____

You can mail this form to the Lindon City Police Department at 100 N. State St. Lindon, UT 84042 or bring it in to the police station. Make sure you also update your information with your monitoring company.