



Permit # \_\_\_\_\_

**FAIRVIEW POLICE DEPARTMENT**  
**RESIDENTIAL ALARM PERMIT APPLICATION**

- NEW ALARM (\$50.00)
- RENEWAL (\$50.00)

**Alarm Permit requirement:** Town of Fairview Ordinance 2022-24 requires all alarm systems, whether monitored or not, in any residential (including individual apartment units), commercial or other non-residential alarm sites in Fairview to have a valid Alarm Permit. **All Alarm Permits must be renewed annually during the month of January. Residential renewal permit fee(s) paid after January 31<sup>st</sup> are considered late and incur a late fee of \$12.50.**

**Registration options:** Complete this form and submit with your payment **OR** complete application online at [www.fairviewtexasalarm.com](http://www.fairviewtexasalarm.com). When paying with a credit card, online or in person, there is a 3% service fee.

**ALARM PERMIT HOLDER:**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

DOB: \_\_\_\_\_ DL#: \_\_\_\_\_ State: \_\_\_\_\_

**Property Address: \_\_\_\_\_ Suite or Apt # \_\_\_\_\_ Fairview, Texas 75069**

Mailing Address if different from Property Address (include Suite or Apt# if applicable): \_\_\_\_\_

Email Address: \_\_\_\_\_

Primary Phone #: \_\_\_\_\_ Secondary Phone #: \_\_\_\_\_

**OCCUPANTS: List occupants who live or are authorized to be at Property Address:**

Name/DOB: \_\_\_\_\_ Name/DOB: \_\_\_\_\_

Name/DOB: \_\_\_\_\_ Name/DOB: \_\_\_\_\_

Name/DOB: \_\_\_\_\_ *Continue on back of this form if necessary.*

**ALARM SYSTEM:**

Alarm System Monitored: YES NO

Alarm Company Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Gate code if applies: \_\_\_\_\_ Firearms in the residence: \_\_\_\_\_

Do you wish to be notified via text message if Police receive an Alarm call at your residence? \_\_\_\_\_

If so, please provide a cell number to be texted. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

***Special Medical Alert information:*** List Name and description of any occupant(s) who are unable to SEE, SPEAK, HEAR, WALK or has other illness such as Dementia, etc. \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION:**

Name: \_\_\_\_\_ Contact Phone#: \_\_\_\_\_

Address: \_\_\_\_\_

Does this person have a key or code to your home? \_\_\_\_\_

Name: \_\_\_\_\_ Contact Phone#: \_\_\_\_\_

Address: \_\_\_\_\_

Does this person have a key or code to your home? \_\_\_\_\_

**PET INFORMATION:**

Pet Name: \_\_\_\_\_ Pet Type: \_\_\_\_\_ Pet Demeanor: \_\_\_\_\_

Pet Name: \_\_\_\_\_ Pet Type: \_\_\_\_\_ Pet Demeanor: \_\_\_\_\_

Pet Name: \_\_\_\_\_ Pet Type: \_\_\_\_\_ Pet Demeanor: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

If you are mailing in this application please attach a check payable to Town of Fairview for the appropriate fee.

Mail to: **Town of Fairview, Attn: Alarm Permits, 372 Town Place, Fairview, Texas 75069**

Call 972-886-4211 ext: 5022 or email [alarm@fairviewtexas.org](mailto:alarm@fairviewtexas.org) regarding questions about the Alarm Permit Requirement.

Use this space for additional occupants:

---

---

---

---