

## **Alarm Registration Renewal Form**



Alarm Registration Division P.O. Box 196321 Nashville, TN 37219-6321 Phone: (615) 862-6779

	Permit # (Office Use Only)		
	New	Renew	
	Cancel	Change	
Permit Applicant			
Permit Applicant Name:			
Phone:	Mailing Addre	ss:	
City:	_ State:	ZIP:	
Email Address:			
Alarm Monitoring Service (If	Applicable)		
Commercial	ı	Residential	
Financial School		Apartment	Duplex
Church Store		Condiminium	Other:
Restaurant Office		House	
Factory Other:			
Alarm Address (If Different 1	han Mailing Add	ress)	
Permit Applicant Name:	•		
Phone:			
City:	State:	ZIP:	
Contacts In Event Of Alarm A	Activation (At Lea	ast One Local Phone	e Number)
Name:	Phone:		Phone:
Name:	Phone:	1	Phone:
PERM	MITS MUST BE F	RENEWED ANNUAL	LLY
	DO NOT WRIT	E BELOW THIS LINE	
NOTICE: Non-compliance with the ter Metropolitan Code of Laws, Section 1		Permit Fee Recei	pt
constitute a violation, and each incidence of non- compliance shall constitute a separate violation. For		\$20.00 Residential	
additional information contact the M Department Alarm Section at (615) 86	etro Police	\$50.00 Comm	nercial
Metro Fire Department Alarm Section 5230.	n at (615) 862-	\$5.00 Late Fe	e
If your check is returned for non-sufficient funds, you your account to be electronically debited or bank dra of the check plus any applicable fees. The use of a ch is your acknowledgement and acceptance of this policon	afted for the amount eck for your payment	Received by:	Date: