



# RESIDENTIAL ALARM USER PERMIT APPLICATION

Portland Police Alarm Administration  
PO Box 1867  
Portland, OR 97207  
Phone: (503) 823-0031  
Fax: (503) 823-0507  
Alarms@PortlandOregon.gov

## OFFICIAL USE ONLY

Date Received: \_\_\_\_\_  
Amount Received: \_\_\_\_\_  
Alarm Permit# \_\_\_\_\_  
Date Issued: \_\_\_\_\_

## ALARM USER INFORMATION

Name \_\_\_\_\_ Date of Birth (Senior Discount) \_\_ / \_\_ / \_\_  
 Additional Name \_\_\_\_\_ Date of Birth (Senior Discount) \_\_ / \_\_ / \_\_  
 Street Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Residence Phone# \_\_\_\_\_  
 Mailing Address (if different): \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Email: \_\_\_\_\_

### RESIDENTIAL ALARM PERMIT FEE: \$25 ANNUALLY

**Senior Discount:** Permit fee is waived if resident is age 62 or older, lives in the home 12 months/year, and can submit a copy of their Oregon State ID as proof of age and residency.

**Acceptable form of payment: Check/Money Order/ VISA/ MasterCard**  
(Make checks payable to Portland Police Alarm Administration)

Credit Card # \_\_\_\_\_ Expiration \_\_ / \_\_ Security Code \_\_\_\_

## ALARM COMPANY INFORMATION

Alarm Company: \_\_\_\_\_ 24-Hours Phone#: \_\_\_\_\_  
 Monitoring Company: \_\_\_\_\_ 24-Hours Phone#: \_\_\_\_\_

## EMERGENCY CONTACT INFORMATION:

<u>Name</u>	<u>Primary Phone</u>	<u>Alternate Phone</u>
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Contact / Alarm User #1 \_\_\_\_\_  
 Contact / Alarm User #2 \_\_\_\_\_  
 Contact / Alarm User #3 \_\_\_\_\_  
 SPECIAL INSTRUCTION FOR OFFICER RESPONSE: (Special directions, firearms, guard dog, security guard, etc) \_\_\_\_\_  
 Persons with sight, hearing or speech disabilities: \_\_\_\_\_  
 Other Instructions: \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_