



City of Torrance, Finance Department, Business License
Application for Alarm System Permit

3031 Torrance Boulevard, Torrance, California 90503 • 310/618-5828

Date: _____

PART I

Resident Alarm

LAST NAME FIRST NAME () PHONE

ADDRESS CITY ZIP CODE

DATE OF BIRTH DRIVERS LICENSE NO.

PART II

Business Alarm

BUSINESS NAME (NOT APPLICABLE IF RESIDENT) () BUSINESS PHONE

BUSINESS ADDRESS CITY ZIP CODE

BUSINESS OWNER () HOME PHONE

OWNER HOME ADDRESS DRIVERS LICENSE NO.

PART III

Emergency Information

(List persons who may secure premises on a 24-hour basis)

NAME () PHONE

ADDRESS CITY ZIP CODE

NAME () PHONE

ADDRESS CITY ZIP CODE

NAME () PHONE

ADDRESS CITY ZIP CODE

Type of Alarm: (Armed robbery, burglary, etc.) _____

Alarm: (Silent, and/or audible) _____

Area Protected: (Windows, doors, safe, etc.) _____

Alarm Company: _____
NAME (CORPORATE AND BUSINESS NAME)

ADDRESS PHONE

WHITE-Business License YELLOW-Police PINK-Customer Copy

DO NOT WRITE ABOVE THIS LINE - OFFICIAL USE ONLY

NAME DT AMT. DATE PERMIT #

ALARM SYSTEM PERMIT

To obtain an alarm system permit, complete the enclosed application and mail with a \$104.00 check, payable to the City of Torrance:

**City of Torrance
Revenue Division
3031 Torrance Blvd
Torrance, CA 90503**

Please complete PART III for EMERGENCY information.
For a RESIDENCE complete PART I or for a BUSINESS complete PART II.

No alarm system permit fee shall be charged for issuance of a permit for a residence where the applicant is sixty-five (65) years of age, or older, or physically disabled and who resides at the location for which the permit is requested.