



ALARM PERMIT APPLICATION

CITY OF ROLLING HILLS ESTATES
4045 Palos Verdes Drive North
Rolling Hills Estates, CA 90274
Phone-310.377.1577 x105
Fax-310.377.4468

This form is also available online on our website
www.RollingHillsEstatesCa.gov

PERMIT NO. _____

CHECK ONE:

____ NEW APPLICATION
____ ALARM COMPANY CHANGE

____ NAME/ADDRESS CHANGE
____ UPDATE INFO

APPLICANT INFORMATION

FOR A BUSINESS:

NAME _____

ADDRESS _____

CITY _____ ZIP _____

TELEPHONE NUMBERS _____

EMAIL _____ FAX _____

BUSINESS OWNER(S) NAMES AND ADDRESSES

FOR A RESIDENCE:

NAME _____

ADDRESS _____

CITY _____ ZIP _____

TELEPHONE NUMBERS _____

EMAIL _____ FAX _____

EMERGENCY INFORMATION (Persons who may secure premises on a 24-hour basis)

1. _____

2. _____

3. _____

Name / Address / Phone Number / Email

ALARM & ALARM COMPANY INFORMATION

NAME _____

ADDRESS _____

TELEPHONE NUMBER(S) _____

APPLICANT SIGNATURE: _____ DATE: _____

ADMINISTRATOR USE ONLY