



City of Commerce
Community Services Department
Public Safety Division
2535 Commerce Way
Commerce, CA 90040
(323) 722-4805

Office Use Only

- New
- Renewal
- Suspended
- Revoked

Burglar Alarm Permit Application

Applicant Information Please print clearly

Contact Name: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Alarm Location

Business Name: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Type of Business: _____

Emergency Information

Person to be notified in case of emergency who has access to an authority to enter premises, and knowledge of the alarm system.

Contact Name: _____ Phone: _____

Contact Name: _____ Phone: _____

Alarm Information

Alarm Type: Audible Silent Combination Other _____

Terminal Point: Alarm Company Answering Service None

Alarm Company or Answering Service Name: _____ Phone: _____

All permits expire on the 31st of December and automatically renew with the information on record. If you have any changes please notify the office as soon as possible.

Applicant's Signature: _____ Date: _____