



Rockport Police Department

714 E Concho St, Rockport, TX 78382
(361) 729-1111

Please provide all applicable information below. Return by mail or in person with \$25 to the Rockport Police Department. Payment can be cash or check made payable to the City of Rockport.

Alarm Permit Application

Alarm Information

Name: _____ Date: _____
Last/Business Name First M.I.

Alarm Address: _____
Street Address Apartment/Unit/Suite

City State ZIP Code

Mailing Address: _____
Street Address/PO Box

City State Zip Code

Phone: _____ Email: _____

Alarm Company: _____ Phone: _____

Burglary Alarm	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Check all applicable:	Surveillance Camera(s) _____
Robbery/Panic Alarm	YES <input type="checkbox"/>	NO <input type="checkbox"/>		Residential _____ Commercial _____
Fire Alarm	YES <input type="checkbox"/>	NO <input type="checkbox"/>		Animals On Location _____ Dog(s) _____ Cat(s) _____ Other _____
			Occupied Full Time _____	Occupied Part Time _____

Keyholders

1st Contact: _____ Phone: _____

2nd Contact: _____ Phone: _____

3rd Contact: _____ Phone: _____

Disclaimer and Signature

I hereby certify that the information contained in this application is true and correct as of the date of its submission, and that I will inform the Rockport Police Department promptly of any changes regarding the alarm system at my dwelling/business, monitoring company, status, or other pertinent pieces of information. I further agree that I shall comply with all provisions of City Ordinance 855 Burglary, Robbery and Fire Alarms. I accept responsibility for all fines and fees that may result from the operation of this alarm system.

Signature: _____ Date: _____