



West Covina Fire  
P.O. Box 141957, Irving, TX 75014, Phone: 1-888-339-5538  
**ALARM PERMIT APPLICATION**

Please type or print in  
BLOCK CAPITAL LETTERS  
clearly inside the box.  
(Please print)

Type of Alarm: ☐ Residential (Single Family Homes) ☐ Commercial ☐ Multi-Family Complex or Residential Care Facility ☐ Govt. Entity

Name of Registration Holder: [Grid]

Business Name: [Grid]

Name of responsible party: [Grid]

Alarm Location:  
(Include Building/Apt #)  
(Include Suite or Unit #)  
City: [Grid] State: [Grid] Zip: [Grid]

Billing Address:  
(if different)  
City: [Grid] State: [Grid] Zip: [Grid]

Email Address: [Grid]

Home Phone: [Grid] Cell Phone: [Grid]

Office Phone: [Grid]

**EMERGENCY CONTACTS**

Name: [Grid]

Phone #1: [Grid] Phone #2: [Grid]

Name: [Grid]

Phone #1: [Grid] Phone #2: [Grid]

**SPECIAL CONDITIONS**

In order to ensure the safety of our officers, the public and to enable the West Covina Fire Department to better protect your property, please provide information regarding potentially hazardous circumstances (i.e. guard animals, hazardous substances, etc.)

Comment: [Grid]

**ALARM INSTALLATION DETAILS**

Alarm Installation Date: [Grid] / [Grid] / [Grid] Phone #: [Grid]

Alarm Installation Company: [Grid]

Address: [Grid]

Monitoring Company:  
(if different)  
Address: [Grid]

Phone #: [Grid]

**PLEASE READ THE FOLLOWING AND SIGN:**

This is to certify that as the applying principal, my immediate family, tenants, or employees who have access to the protected premises have been given training which includes procedures and practices to follow in the event that the alarm system is accidentally activated, I also acknowledge that the installation company left me a set of written instructions for the alarm system, including written guidelines on how to avoid false alarms. The Police response may be influenced by factors including, but not limited to, the availability of officers, priority calls, traffic conditions, emergency conditions and staffing levels.

Signature: (Owner) \_\_\_\_\_ Date: [Grid] / [Grid] / [Grid]

In accordance with the Ordinance City of West Covina, CA Ordinance No. 2336, if you have an active alarm system in the West Covina Fire, California, it must be registered with the West Covina Fire separately. The fee for an alarm registration/renewal and false alarms is set forth below and shall be paid by the alarm user.

**False Fire Alarm and Nuisance Fire Alarm--  
Registered location Fine Schedule**

- 1st false alarm : \$100.00.
- 2nd false alarm : \$150.00
- 3rd false alarm : \$250.00
- 4th false alarm : \$350.00
- 5th false alarm : \$450.00
- 6th false alarm and above : \$550.00 each

**False Fire Alarm and Nuisance Fire Alarm --  
unregistered/expired permit location Fine Schedule**

- 1st false alarm : \$200.00
- 2nd false alarm : \$250.00
- 3rd false alarm : \$350.00
- 4th false alarm : \$450.00
- 5th false alarm : \$550.00
- 6th false alarm and above : \$650.00 each

**Registration & Renewal Fees:**

- a) \$10.00 for Commercial/ Multi-Family / Residential Care facilities
- b) Single Family homes are not required to register**

**For Customer Service Call: 1-888-339-5538**

**Mail this form and payment to:**

West Covina Fire Alarm Program  
P.O. BOX 141957, IRVING, TX 75014