



**Lee County Sheriff's Office
False Alarm Reduction Unit
PO Box 60557 Fort Myers, Florida 33906 (239) 477-1243
ALARM USER APPLICATION**

ALARM LOCATION INFORMATION (Please Print Clearly)

Name of Residence or Business (name alarm company uses for dispatch) _____ () _____
Location Telephone Number

Email Address: _____

Alarm Address: _____
(one address only) Street Name (N, S, E, W) Suite/Apt/Unit #

Directions: _____ City State Zip Code

() ()
Location Telephone Number Alternate Phone—Cellular Phone

LOCATION TYPE Hours of Business: _____ Cleaning Crew
Residence: Single Family Condo Apartment
Business: Retail School Church Wholesale Bank Municipal

RESPONSIBLE KEY-HOLDERS 2 other responsible persons who will respond to alarm & assist Sheriff's Office determine alarm cause & secure premises
Keyholder 1 Keyholder 2 Security Personnel

Name: _____

Day Telephone: () () ()

Night/Cell Phone: () () ()

Email: _____

OWNER MAILING INFORMATION

Attn: _____ Part-Time Resident? Yes No

Address: _____ Email: _____

City: _____ State: _____ Zip: _____

Owner: _____ () ()
Alternate Phone Alt. Cell

ALARM COMPANY AND/OR MONITORING COMPANY

Alarm Installation/Service Company Alarm Monitoring Company

Company Name: _____

Phone Number: () ()

Email: _____

OBSTACLES OR HAZARDS:

Dog(s) Chemicals Firearms Explosives Fenced Compound Gate Code

ALARM TYPE (check all that apply):

Burglary/Panic Audible Silent Holdup Robbery

Applicant Signature _____ Date _____ Must include \$25 check or money order payable to LCSO

LCSO Use Only: Permit Number		Date Issued		Amount Paid	
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FALSE ALARM ORDINANCE REQUIREMENTS

1. The application fee **MUST** be included with the application. Please make check or money order payable to the Lee County Sheriff's Office.
2. Every alarm operator must apply annually for a non-transferable alarm permit. Permits are valid for one year from the date of issuance.
3. Responsibility for false alarms shall be borne by the permit holder.
4. The permit holder shall submit updated application information within fifteen (15) days of when the on-file information has changed.
5. Permits may be revoked if this application contains false information or after the tenth false alarm within a permit year.
6. In addition to other applicable false alarm penalties, a fine of \$200 will be assessed if the Lee County Sheriff's Office respond to an unregistered alarm system with a revoked permit.
7. Alarm systems **CANNOT** be equipped with an automatic dialing device programmed to connect directly to the Lee County Communications Center.
8. Information contained in this application is confidential and exempt from disclosure in accordance to section 281.301 Florida Statutes.

The above list **DOES NOT** contain all elements and/or requirements of the **Lee County False Alarm Ordinance # 03-09**. For additional information or assistance completing the application, please contact the Lee County Sheriff's Office False Alarm Reduction Unit (239) 477-1243.

I have read and understand the above requirements of being an alarm user.

Signature of User

Date