

 **Alarm Business License Application**

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| **BUSINESS Information** |
| Business Name:      | State Sales Tax Number:      |
| DBA Name:       |
| Business Address | Street:       | City:       | State:       | Zip:       |
| Mailing Address | Street:       | City:       | State:       | Zip:       |
| Business Phone:       | Preferred Phone:      | E-Mail Address:       |
| Brief Description of the Nature of the Business:       |
| Arrests or charges of offense other than minor traffic violations during the past five (5) years?  [ ]  Yes [ ]  No |
| If marked yes to the above, please list the charges, jurisdictions and dates. Attach additional pages if necessary. |
| **PARENT COMPANY (If Applicable)** |
| Name of Parent Company:       |
| Company Address | Street:      | City:      | State:      | Zip:      |
| Mailing Address | Street:      | City:      | State:      | Zip:      |
| Business Phone:      | Preferred Phone:      | E-Mail Address:      |
| **EMERGENCY CONTACTS (Must Provide Three)** |
| Last Name: | First Name:      | Middle Name:      | Phone Number:      |
| Home Address | Street:       | City:       | State:       | Zip:       |
| Last Name: | First Name:      | Middle Name:      | Phone Number:      |
| Home Address | Street:       | City:       | State:       | Zip:       |
| Last Name: | First Name:      | Middle Name:      | Phone Number:      |
| Home Address | Street:       | City:       | State:       | Zip:       |

Application is hereby made for a license to engage in or operate an ALARM BUSINESS in accordance with the provisions of Chapter 13 Article 3 of the Lawrence City Code and in the connection, the above information is submitted. <https://lawrenceks.org/attorney/city_code/>

Note: Electrical contractors licensed under Section 5-431 are exempt from alarm company license fee, but shall register with the City Clerk.

**PLEASE INCLUDE**: [ ]  $300.00 fee first year or $150.00 renewal fee per year (expires December 31st)

[ ]  $75.00 additional late charge for 60 day delinquency

[ ]  List of your company’s alarm users & their addresses for The City of Lawrence

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APPLICANT’S NAME (Printed) APPLICANT’S SIGNATURE TODAY’S DATE

If you have any questions, or there is a need for additional information, please feel free to contact our offices.

**City Clerk’s Office**

**6 East 6th St.**

**PO Box 708**

**Lawrence, KS 66044**

**cityclerk@lawrenceks.org**

**(785) 832-3200**