

**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**](mailto:cityclerk@lawrenceks.org)

**(785) 832-3200**