



SELMA POLICE DEPARTMENT



9375 CORPORATE DRIVE SELMA, TX 78154

ATTN: RESIDENT

Alarm permits expire every year on December 31st. You do not need to fill out a new permit each year, unless any of the information you provided has changed. You can either drop off or mail in the \$5.00 to the below listed address.

The City allows 5 false Burglar Alarms and 5 false Fire Alarm activations per calendar year. Upon the 6th false Burglar Alarm, the City will charge \$25 for each subsequent false activation. Upon the 6th false Fire Alarm, the City will charge \$50 for each subsequent false activation. **Robbery or hold-up alarms are \$100 each.** Calendar year runs January 1st and ends December 31st.

In order to keep False Alarm activations at a low, please be sure to train anyone who has access to your Alarm System on how to use it. A majority of false alarms are the result of human error (i.e.: forgetting and entering wrong codes and accidental set-offs). Also, anytime your alarm company works on your alarm system or tests it, be sure to contact Dispatch at (210) 653-0033 to let them know not to send an Officer to your home during that time frame. This should help reduce the rate of false alarms. Additional information pertaining to the City may be located via the web at; www.ci.selma.tx.us

CONTACT INFORMATION:

SELMA POLICE DEPARTMENT OR THE WEB: www.ci.selma.tx.us

9375 CORPORATE DRIVE

SELMA, TX 78154

(210) 651-5368

MONDAY—FRIDAY; 8 AM—5 PM

Ext. 7871

PATRICIA WALLER

Ext. 7865

TEDDI L YOUNG

DISPATCH; 24 HRS A DAY; 7 DAYS A WEEK

(210) 653-0033



**DISPATCH (210) 653-0033 OFFICE (210) 651-5368 FAX (210) 651-3272
WWW.CI.SELMA.TX.US**



SELMA POLICE DEPARTMENT



CITY OF SELMA ALARM SYSTEM APPLICATION/PERMIT

Name of Applicant _____ Date of Application _____

Address _____ Telephone _____

The undersigned hereby applies for a permit to operate the type of alarm checked below.

I certify that the alarm system presently meets the requirements set forth in the Texas Local Government Code and that it will be maintained in the manner provided therein and that I will comply with each applicable provision of said code.

Type of alarm: Burglar _____ Panic _____ Fire _____ Medical _____ Other _____

Name, License Number & Phone Number of Alarm Company: Name _____

Address _____ Lic. No. _____ Phone No. _____

The below named individual or organization can be contacted to respond to the location within 30 minutes of the activation of the licensed alarm.

Name _____ Address _____ Phone No. _____

Name _____ Address _____ Phone No. _____

Applicant Signature _____ Permit Number _____ Date Issued _____

\$100.00 FINANCIAL INSTITUTION Issuing Authority _____

\$ 25.00 COMMERCIAL

\$ 5.00 RESIDENTIAL Note: This permit is non-transferable. Expires _____

Would you like an email reminder? _____