

Mail to:
Clerk-Treasurer
Town of Speedway
1450 N. Lynhurst Drive
Speedway, IN 46224
Phone No.: 246-4111

Permit No. _____

Issue Date _____

Exp. Date _____

**APPLICATION FOR ALARM PERMIT
TOWN OF SPEEDWAY, STATE OF INDIANA**

1. Name of Applicant: _____ Home Phone: _____
Home Address: _____

2. TYPE OF ALARM: (Check ALL That Apply)
Residence _____ Burglary _____ Silent _____
Business _____ Robbery _____ Local _____

3. Name of Alarm Company: _____

4. Alarm Installation Date: _____

5. IF BUSINESS ALARM:

Business Name: _____ Phone: _____

Address: _____ Zip Code: _____

(Include Apt. No. or Room No.)

Nature of Business: _____

Normal Business Hours: _____

6. I hereby swear (or affirm) under penalty of perjury that the foregoing facts contained herein are true and further swear that the alarm system which this permit is being applied does not violate the Town of Speedway General Ordinance 777 Section 1.01.110.

Permit Fee:

Business: \$35.00

Residence: \$5.00

Signature of Applicant

Date