



Eureka Police Department  
604 C Street • Eureka, California 95501  
(707) 441-4060  
www.eurekapd.net

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Dear Alarm Owner,

Pursuant to the City of Eureka Ordinance 684-C.S., passed 2-2-05; Am. Ord. 854-C.S., passed 4-18-17, alarm owners in the City of Eureka must obtain an alarm permit and are required to maintain and operate their alarm system in a manner which will reduce or eliminate false alarms. Failure to obtain a permit is a violation of Eureka Municipal Code 32.35-56, with penalties up to and including a misdemeanor violation.

All information on the alarm permit is kept confidential and will assist the Eureka Police Department in contacting you or the person you designate, in the event your alarm is activated.

The fee for an alarm permit is \$20 and must be renewed at the beginning of each calendar year. Payments can be made through Phoenix Information System Group, our false alarm processing management system. Accepted forms of payment are certified checks, money orders, or cashier's checks that can be made payable to "City of Eureka" and mailed to: PO Box 11370, Santa Ana, CA 92711-1370. Citizens can also log onto their account once created at the link below and pay with a credit card as well.

Please refer to our website at <http://fams.wincitex.com/City/eureka> for additional information including FAQs, the complete City alarm ordinance, the City Fee Schedule, and preventative ways to eliminate false alarms.

Thank you,

A handwritten signature in blue ink that reads "Stephen Watson".

Stephen Watson  
Chief of Police



**PO Box 11370**  
**Santa Ana, CA 92711-1370**

**CITY OF EUREKA**  
**APPLICATION FOR ALARM PERMIT**

When completed submit via online or mail to: PO Box 11370 Santa Ana, CA 92711-1370	<input type="checkbox"/> Business <input type="checkbox"/> Residential <input type="checkbox"/> City <input type="checkbox"/> County or State <input type="checkbox"/> Federal	<i>Official Use Only</i> <input type="checkbox"/> New Alarm <input type="checkbox"/> Renewal
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*ALARM LOCATION*

<b>LOCATION</b>		
_____		
Business Name -or- Resident's Name (Last name, First name)		
_____		
Street #	Street Name	Apt/Suite
_____		
City, State, Zip		
_____		
Direct Phone (If business, no automated systems/phone trees if possible)		

<b>RESPONSIBLE PARTY</b>		
_____		
Name (Last name, First name)	Date of Birth	
_____		
Street #	Street Name	Apt/Suite
_____		
City, State, Zip		
_____		
Home Phone	Work Phone	Cellular Phone



*CONTACTS*

<b>CONTACT</b>		
_____		_____
Name (Last name, First name)		Date of Birth
_____		
Street #	Street Name	Apt/Suite
_____		
City, State, Zip		
_____		
Home Phone	Work Phone	Cellular Phone

<b>CONTACT</b>		
_____		_____
Name (Last name, First name)		Date of Birth
_____		
Street #	Street Name	Apt/Suite
_____		
City, State, Zip		
_____		
Home Phone	Work Phone	Cellular Phone

<b>CONTACT</b>		
_____		_____
Name (Last name, First name)		Date of Birth
_____		
Street #	Street Name	Apt/Suite
_____		
City, State, Zip		
_____		
Home Phone	Work Phone	Cellular Phone



*ALARM COMPANY INFORMATION*

<b>MONITORED BY</b>		
<hr/>		
Company Name		
<hr/>		
Street #	Street Name	Apt/Suite
<hr/>		
City, State, Zip		
<hr/>		
Primary Phone	Alternate Phone	

<b>SERVICED BY</b> <input type="checkbox"/> SAME AS ABOVE		
<hr/>		
Company Name		
<hr/>		
Street #	Street Name	Apt/Suite
<hr/>		
City, State, Zip		
<hr/>		
Primary Phone	Alternate Phone	

*ALARM INFORMATION*

<b>CONNECTION</b> <input type="checkbox"/> Monitored <input type="checkbox"/> Non-Monitored	<b>LOCAL SOUND</b> <input type="checkbox"/> Silent <input type="checkbox"/> Audible	<b>RESET</b> <input type="checkbox"/> Automatic <input type="checkbox"/> Manual	<b>ALARM TYPE</b> <input type="checkbox"/> Burglar <input type="checkbox"/> Panic <input type="checkbox"/> Panic Silent <input type="checkbox"/> Robbery <input type="checkbox"/> Robbery Silent <input type="checkbox"/> Fire <input type="checkbox"/> Other
<b>HAZARDS OR OTHER INFORMATION</b>			
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