

MAKE CHECK/MONEY ORDER PAYABLE TO: CITY OF FOSTORIA

## Police Division | Chief Keith Loreno

213 S Main Street | Fostoria, Ohio 44830 Ph (419) 435-8573 Records (419) 379-9999 Fax (419) 435-9754 Aweinandy@fostoriaohio.gov

2017 ALARM PERMIT APPLICATION
Complete the portion of the application that applies to your requested permit, RESIDENTIAL/BUSINESS. Print all information clearly and completely. The permit is renewed yearly beginning January 1st ending December 31st. If you have any questions, please call the Records Department at: 419-435-8573. Please note: NO FEE is due for renewals/changes to information.

Permit Holder Name:		La	ast 4 SSN #:	DOB:_	//
Phone #'s: Home:					
Permit Holder Name:				DOB:	
Phone #'s: Home:					
Alarm Location Address:				Fost	toria OH 4483
-	Street Address ng/Billing Address (if different):		Apt/Condo/Suite #	#	
mail Address:					
USINESS APPLICATION:		•	ies/Schools are ex	empt from P	ermit fees)
usiness Name:					
larm Location Address:				Fost	oria OH 44830
-	reet Address		Suite / Apt #		
lailing/Billing Address (if di	fferent):				
usiness Phone #:	Email Addr	ess:			
OR BUSINESS AND RES	IDENTIAL APPLICAN	ITS			
			Business/24 Hour P	hone #	<u></u>
LARM COMPANY				Phone # ROBBERY/	
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Permit Number Assigned: