

City of Tullahoma Police Department  
P.O. Box 807  
Tullahoma, TN 37388

APPLICATION FOR BURGLARY / ROBBERY ALARM PERMIT

BUSINESS OR RESIDENCE NAME, \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE # \_\_\_\_\_

DATE OF APPLICATION: \_\_\_\_\_

I certify that I have read and understand Tullahoma Ordinance 20-900 and agree to comply, and do fully understand the penalties which will be invoked in the event of non-compliance.

In case of an alarm, you are to notify one of the persons listed below:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

I understand and agree that if a long distance call is required, the person receiving the call must accept a collect call.

\_\_\_\_\_  
OWNER / MANAGER