

## **Development Services Department** 320 E Jefferson Blvd, Dallas TX 75203

(214) 948-4480

## FIRE ALARM CONTRACTOR REGISTRATION

DATE:							
NAME OF COMPANY:					ACR.#		
COMPANY ADDRI		umber	Street	City		State	Zip
MAILING ADDRES		umber	Street	City		State	Zip
PHONE NUMBER:	EM	AIL:					
OWNER OR OFFIC	CER OF THE	COMPAN	<u>NY</u> :				
NAME:		_					
HOME ADDRESS	Number		Street	City	State	Zip	
	PERSONNI	EL AUTH	IORIZED TO	SIGN PERMI	TS:		
PLEASE LIMIT AD Nan 1. 2. 3. 4. 5.	ne		EL. <u>ALL INFC</u> PIN			E COMPL	<u>ETE.</u>
I DO DEPOSE AN	D SAY THE A	BOVE IN	FORMATION	IS TRUE AN	D COR	RECT.	
Signature of Responsible Individual					Clerk's Signature		
_			OFFICE USE	ONLY			
If company is loca	ated within the	city limit	s of Dallas, pr	ovide one of	the follo	wing:	
C.O. # HOME OFFICE ON FILE							
CONTR.#:		_					