TORIC CITY OF HIS

Franklin Police Department

Records Section PO Box 421 Franklin, TN 37065-0421

Registration Form



INSTRUCTIONS: Print legibly or type. Complete all application items. Complete a separate application for each address to be permitted. Attach payment and return to the address shown at the bottom of this form

Occupant Name or Business Name Address Suite/Aptil City State Zip Phn1 Phn2 Phn3 Address City State Zip Name Phn3 Phn4 City State Zip 3 Contact Names Contact 1 Phn1 Phn1 Phn2 Phn2 Phn2 Phn2 Phn2 Phn2 Phn2 Phn2
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Address City State Zip 3 Contact Names Contact 1
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Additional Information Date Installed/Activated ————————————————————————————————————
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5 Alarm Companies
Monitored By
Phn1
Sold By
Phn1
I understand that, in accordance with City of Franklin Alarm Systems Ordinance title 20 chapter 2, applicant is
financially responsible for all charges and penalties specific in this section. Signature Date

NOTE: If information provided in application changes, you must notify the Franklin Police Department within ten (10) working days. Attach your check, made payable to the Franklin Police Department, for a non-refundable application fee and mail or deliver to:

Franklin Police Department PO Box 421 Franklin, TN 37065-0421