

**MARTINEZ POLICE DEPARTMENT
ALARM REGISTRATION**

NAME: _____

ADDRESS: _____

PHONE: _____ DATE DUE: UPON RECEIPT

Resolution 066-15

A resolution authorizing the following fee structure regarding the appropriate sections of the Alarm System Ordinance (Chapter 9.7) of the City of Martinez.

The City Council of the City of Martinez does resolve as follows:

A. Alarm System/Registration (refer to Section 9.70.050)

1.	Residential (one time fee)	\$35	_____
2.	Commercial (one time fee)	\$45	_____

TOTAL FEE DUE \$

Please return your check in the amount indicated above and mail with this form to:

Martinez Police Department
Attn: Dispatch Supervisor Josie London
525 Henrietta Street
Martinez, CA 94553

Checks are to be made payable to "City of Martinez"

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If an alarm is reported at your home or business, whom should we notify?

1. _____

2. _____

3. _____

Please notify the Martinez Police Department at (925) 372-3437 or jlondon@cityofmartinez.org if you have any changes in your alarm notifications listed above.