

MARINA POLICE DEPARTMENT

TINA M. NIETO
Chief of Police



BRUCE CARLOS DELGADO
Mayor

211 HILLCREST
AVENUE
MARINA, CA 93933
PHONE 831- 884-1210
FAX 831- 384-5321

APPLICATION FOR ALARM USERS

PRINT OR TYPE ALL INFORMATION REQUIRED ON THIS APPLICATION

Business or Homeowner Information

Business Name: _____

Or Homeowner's Name: _____

Address: _____ Apt./Unit _____

Phone:_(_____)_____ Cross Street: _____

Alarm Company Information

Alarm Co. Name: _____ Phone: (____) _____ - _____

Address: _____ Apt./Unit _____

Miscellaneous Information

Officer Safety: Dog: (Color/Breed) _____ Inside/Outside/Both (circle one)

Gun: (circle one) No / Yes, Location _____

Other Risk(s): _____

Other Information: Extra Key(s): (circle one) No / Yes, Location _____

Money: (circle one) No / Yes, Location _____

COMPLETE OTHER SIDE

Contact Information # 1

Name: _____ Title: _____
Address: _____
Phone: () _____ - _____ Has Key? Yes___ No___ Will Respond? Yes___ No___

Contact Information # 2

Name: _____ Title: _____
Address: _____
Phone: () _____ - _____ Has Key? Yes___ No___ Will Respond? Yes___ No___

Contact Information # 3

Name: _____ Title: _____
Address: _____
Phone: () _____ - _____ Has Key? Yes___ No___ Will Respond? Yes___ No___

**Return completed registration form with \$25.00 made payable to the City of Marina,
211 Hillcrest Avenue, Marina, CA 93933.**

Date

Signature of Applicant