



Chambers County Sheriff's Dept. Alarm Information

Resident___ Business ___ Non-Profit___ Update Info ___

(Please check the appropriate selection above)

Applicant or Business Name:_____

Address of Alarm:_____

City_____ Zip_____ Subdivision_____

Phone: Home#: (____)_____ Work#: (____)_____ Cell#(____)_____

Mailing Address:_____

(If your physical mailing address is different from the address noted above/fill in here) Ex: P.O. Box

Directions to property:_____

Pets in/out of residence/business:_____

Residential owners vehicles:_____

Other vehicles:_____

Contact Person(s) 30 minute response with code & key. (Relation: Employee, Friend, Relative, Neighbor)

Name 1: _____ Relation___ Address:_____

Home#:_____ Work#:_____ City, State_____

Name 2: _____ Relation:___ Address:_____

Home#:_____ Work#:_____ City, State_____

If you have additional key holders, please list them on the bottom of this form.

Alarm Company Information (with telephone # and Password):

Name:_____ Phone#: (____)_____

Address_____ City, State_____

I hereby certify that the above information is true and correct to the best of my knowledge.

Signed:_____ Date: _____

Print Name:_____

Mail application to:

CHAMBERS COUNTY SHERIFFS DEPT.
P. O. 998
Anahuac, Texas 77514

Fax to: (409) 267-6736

For information or questions in reference to this form, or in reference to a change, cancellation or move, please call (409) 267-8318. If you are unsure if you are located in Chambers County, please call (409) 267-8422 to verify.

PLEASE FILL OUT COMPLETELY