



# Residential Alarms/Security System

## Permit Application (Electrical)

Escambia County, Florida

Permit Number:

Job Address:	Lot or Apartment Number:
Owner:	Phone Number:
Contractor:	County License Number:

Work Classification:	<input type="checkbox"/> New	<input type="checkbox"/> Addition	<input type="checkbox"/> Repair	<input type="checkbox"/> Other
System Type:	<input type="checkbox"/> Manual	<input type="checkbox"/> Automatic	<input type="checkbox"/> Combination	
Annunciator Panel:	<input type="checkbox"/> Manned	<input type="checkbox"/> Unmanned		
Total Number of Floors	_____			
Total Number of Security Devices	_____			

Remarks or Comments:
Driving Directions:

Escrow Account Number:	Date:
Applicant Signature:	

\*\*\* County License Number and Escrow Account Number MUST be included for processing\*\*\*

*Residential Alarm/Security Systems*