



Alarm Permit Application

101 North Main Street Lancaster, SC 29720

Phone (803) 416-9777

Date Submitted: _____ (Check One) Business _____ Residential _____

Business/Owners Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Subdivision: _____ Cross Street: _____

** Example: an alarm is going in at 4179 Buckingham Drive, what street is Buckingham Drive off of

Phone: _____ Mobile: _____

Contact Person with key or alarm code

Name: _____ Phone (work): _____

Address: _____ Phone (mobile): _____

Name: _____ Phone (work): _____

Address: _____ Phone: (mobile): _____

Alarm Company Information

Name of Company: _____ Phone: _____

Alarm system monitored? Yes _____ No _____

Any animals on property? Yes _____ No _____ If yes, what type? _____

Are any animals restrained? Yes _____ No _____ If yes in what manner? _____

Please make check payable to: Lancaster County Alarm Permit Fee \$10.00

Mail to: PO Box 1809 Lancaster, SC 29721 Attn: Zoning Department