



City of Nekoosa
951 Market Street
Nekoosa, WI 54457
715.886.7877 - City Clerk
715.886.7901 - Fax

Alarm Permit Application

Per §12.11 Nekoosa Municipal Code

Alarmed Property Address: _____

Business Name (if applicable): _____

Permit Holder Name: _____

Address: _____

Phone: _____

Email: _____

Type of Monitoring: *Central Answering System* *Homeowner Monitory Only*
Alarms service company contact Wood County Communications Center, Wisconsin Rapids, WI

Type of Alarm: *Entry/Break-in* *Fire* *Other: _____*

Alarm company service information:

Name: _____

Address: _____

Phone: _____

Provide a brief description of area(s) to be alarmed:

Rec. by: _____ Date: _____

Nekoosa City Clerk

Date:

\$10 Fee collected: Yes No Informed of False Alarm Ordinance §12.11? Yes No

Cc: Fire Chief, Police Chief