

# Alarm Contractor/Monitor Registration Application Baltimore County – Alarm Reduction Team

All information is required and must be typed or clearly printed

## Alarm Business Information

Business Name \_\_\_\_\_  
Trade Name \_\_\_\_\_ Federal Employer ID# \_\_\_\_\_  
Address \_\_\_\_\_  
Street No. Street Name Suite/Unit  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

**You must provide a copy of your MSP Alarm License #** \_\_\_\_\_

Mailing address if different from Business Address

Address \_\_\_\_\_  
Street No. Street Name Suite/Unit  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

## Resident Agent

Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Address \_\_\_\_\_  
Street No. Street Name Suite/Unit  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

## Corporate Office/Owner

President/Partner/Owner \_\_\_\_\_  
Address \_\_\_\_\_  
Street No. Street Name Suite/Unit  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

## Primary Type of Alarm Business (check only one)

Sell \_\_\_\_\_ Install \_\_\_\_\_ Monitor \_\_\_\_\_ Service \_\_\_\_\_ Respond \_\_\_\_\_

## Form of Business (check only one)

Sole Proprietorship \_\_\_\_\_ Partnership \_\_\_\_\_ Corporation \_\_\_\_\_

## Number of Active Alarm Customers in Baltimore County

Residential \_\_\_\_\_ Non-Residential \_\_\_\_\_

## Alarm Installation Standards

An alarm business that installs an alarm system must have at each alarm installation site at least one employee, to supervise the installation of any alarm system, who is licensed by the State of Maryland as an alarm technician.

I DO SOLEMNLY DECLARE AND AFFIRM THAT THE CONTENTS OF THIS APPLICATION ARE TRUE AND CORRECT

\_\_\_\_\_  
Signature of President, Partner or Owner

\_\_\_\_\_  
Date

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**OFFICIAL USE ONLY:**

\_\_\_\_\_ **Date entered** \_\_\_\_\_ **Initials**

\_\_\_\_\_ **Fee paid** Check or Money Order # \_\_\_\_\_

\_\_\_\_\_ **Fee waived** **Attach a copy of Baltimore County Electrical License**

\_\_\_\_\_ **Copy of Maryland State Police Alarm License was provided**

\_\_\_\_\_ **Copy of Legislation and Regulations mailed on** \_\_\_\_\_