

Lancaster County, SC

Alarm System Permit Application

Business or Residence

(Please circle one)

Date: _____

Street Address: _____

Telephone: _____ Pager: _____ Cell Phone: _____

Mailing Address: _____

Contact Person With A Key or Alarm Code:

1. Name: _____ Telephone: (h) _____
Address: _____ (w) _____
2. Name: _____ Telephone: (h) _____
Address: _____ (w) _____

Alarm Company Name: Comporium Security

Does this company monitor your alarm system? YES

Any Animals on Property ____yes ____ no If yes, type _____

Is your animal restrained? ____yes ____no If yes, in what manner
____Chained ____Fence _____other

Fee: \$10 Note: FEE MUST ACCOMPANY APPLICATIONS

Checks or money orders should be payable to:
Lancaster County Building & Zoning
PO Box 1809
Lancaster , SC 29721