



Spartanburg County Government

Nonresidential Alarm Registration

366 N. Church Street

P.O. Box 5666

Spartanburg, SC 29304

Telephone (864) 596-2727

Fax (864) 596-2194

falsealarm@spartanburgcounty.org

This form may be completed online at <http://services.spartanburgcounty.org/SCCRS/regtype.aspx>

Business Information

Business/Organization Name _____

Type of Business/Organization: _____

Federal Tax # _____ State of SC Sales & Use Tax # _____

Is this Business? New _____ Existing _____ Is this Business Seasonal? Yes _____ No _____

Do you prefer to be contacted via email when possible? Yes _____ No _____

Email Address _____ Business website _____

Telephone _____ Fax _____

Physical Address _____

Mailing Address (if different than physical address) _____

Is the alarm monitored? Yes _____ No _____

Business Contact Information

Name _____ Telephone _____

Primary Alarm Responder (Optional - This would be the first person contacted in case of an emergency.)

Name _____ Title _____

Telephone(s) _____

Two Alternate Individuals Authorized to respond to your Alarm (Optional)

Name _____ Name _____

Telephone _____ Telephone _____

Alternate Telephone _____ Alternate Telephone _____

Note

Once received and processed by Spartanburg County, a permit number will be issued and your permit will be valid until December 31st. This permit will need to be renewed annually thereafter and may be completed by contacting the County Offices for the necessary paperwork. Please have your permit number available when contacting this office, your Alarm Company, or emergency personnel.

I certify that all information on this registration form, including any attachments, is true and accurate. I accept responsibility for any fines and/or fees that may be applicable.

Signed _____ Date _____