



**BUILDING SERVICES SECTION
SECURITY ALARM LABEL REQUEST**

DATE _____

It is understood that the contractor will submit a Uniform Notice of Security Alarm System Project within 14 days after completing the project.

ELECTRICAL / ALARM COMPANY: _____
PLEASE PRINT

SIGNATURE (CONTRACTOR OR AUTHORIZED AGENT): _____

IF SIGNED BY AUTHORIZED AGENT, PLEASE PRINT NAME: _____

CONTRACTOR LICENSE NUMBER: _____

CONTRACTOR'S ADDRESS: _____

CITY: _____ ZIP: _____

PHONE: _____ FAX: _____

CONTRACTOR'S E-MAIL ADDRESS: _____

QUANTITY OF LABELS REQUESTED: _____

NOTE: Unused label(s) are valid for one year after date of purchase.

To be completed by Building Services staff:

QUANTITY OF LABELS ISSUED: _____ X \$40.00 EACH = TOTAL FEE DUE \$ _____

LABEL SEQUENCE: _____

ISSUED BY: _____

DATE: _____