



**City of Alton, Illinois
Alarm Registration & False Alarm Management**

Alarm Company Escrow Deposit Form

Keep this top portion for your records.

In accordance with the City of Alton Ordinance 7181, Section 7-5-4, Paragraph D, this deposit represents escrow funds on behalf of the Alarm Company stated below, for the payment of security alarm system registration fees. The Alarm Company may elect to pay false alarm fines from this account.

Mail to:

CITY OF ALTON - ARFAM
PO BOX 66914
SAINT LOUIS, MO 63166-6914

Check Number: _____ **Check Date:** _____ **Amount:** _____

Make Check/Money Order Payable to: CITY OF ALTON – ARFAM

*** Please write the City of Alton Business License number on your check ***

TEAR AT THE LINE BELOW AND MAIL THE COUPON WITH YOUR DEPOSIT

**City of Alton, Illinois
Alarm Registration & False Alarm Management
Alarm Company Escrow Deposit Form**

Alarm Company Information:

Business License #: _____

Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Telephone: _____

Mail to:

CITY OF ALTON – ARFAM
PO BOX 66914
SAINT LOUIS, MO 63166-6914

Check Number: _____ **Check Date:** _____ **Amount:** _____