City of Wichita False Alarm Appeal Form

| Alarm User Name: | Date: |
|---|---|
| Alarmed Location Address: | |
| Alarm Permit (Account) Number: | Phone Number: |
| Date of False Alarm Being Appealed: | |
| Grounds for Appeal (Check All that Apply): | |
| Weather Related (must include weather re | eport) |
| Criminal Activity (must include police rep | port and/or pictures of attempted break-in or damage) |
| Mechanical Malfunction | |
| Alarm Company Error | |
| Utility Failure (must include report from e | electric, phone and/or cable provider confirming outage) |
| Other | |
| Explanation (another page may be attached if mor | e space is needed): |
| | |
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| NOTE: Additional supporting information mu wish to have considered for your appeal, include | ast be attached to this form. Please attach all documentation you ling additional letter of explanation, photographs, documents, etc. False Alarm Appeal Form. A \$10.00 appeal fee is also required for d. |
| I hereby declare: | |
| | re specific approval of the owner to act as an agent for this appeal; and st of my knowledge and belief, the appeal is true, correct and a complete |
| Signature: | Printed Name: |
| Mailing Address: | |
| Mailing City and State: | Mailing Zip Code: |