

**Requisition**

Req # 00437536

PO #

Date: 07/19/21

Bill To:

Vendor: 296597  
 OLIVAREZ, EDUARDO  
 C/O HEALTH DEPT.

Ship To: HEALTH DEPARTMENT  
 1304 S. 25TH  
 EDINBURG TX 78539

Contract No: REIMBURSEMENT

Contact: JOSIE GARCES  
 956-383-6221

Special Instructions:

QUANTITY	UOM	DESCRIPTION	UNIT PRICE	AMOUNT
1.00	EACH	AI DO NOT DUPLICATE ORDER CITY FO PHARR ALARM PERMIT APPLICATION FEE FOR THE PHARR CLINIC, 300 W. HALL ACRES, STE. B, PHARR, TEXAS	15.00	15.00
1.00	EACH	MONEY ORDER Account No _____	.99	.99
		1-1100-441-00-340-003-0-811	<u>Encumbrance</u> 15.99	
			Freight	.00
			Total	15.99
		REPORT ROAD HAZARDS 1-866-HCR-SAFE OR 1-866-427-7233		

Authorized By: \_\_\_\_\_



# Pharr

Police Department



PHONE: 956-402-4700  
Fax: 956 784-7839  
MONDAY THROUGH FRIDAY 8 a.m. to 5 p.m.

CITY OF PHARR  
BURGLARY ALARM PERMIT APPLICATION  
FOR ONE ALARM SYSTEM

**PLEASE PRINT**  
**THIS APPLICATION MUST BE RETURNED**  
**AND FILLED OUT COMPLETELY.**

**PERMIT FEE:**

NEW ALARM RESIDENTIAL OR COMMERCIAL \$20.00

RENEWAL RESIDENTIAL OR COMMERCIAL \$15.00

LATE FEE AFTER THIRTY DAYS (30) \$50.00

List any known hazards police officers may encounter at alarm site:

**PLEASE READ BEFORE FILLING OUT APPLICATION:**

1. PERMIT HOLDER- We must have the name, address and telephone numbers (home and business) of the PERSON who will be responsible for the alarm system. A COMPANY NAME IS NOT ACCEPTABLE.
2. Signature of applicant/Permit holder - must be the signature of the person listed as permit holder.
3. Please list all zip codes and all area codes other than 956.
4. Application must include check or money order made out to **City of Pharr**. Also Cash accepted.
5. No permit fee shall be required for a permit obtained for an alarm system at a one-family dwelling when the alarm site is determined by the Chief or authorized designee to be occupied by a 65 years of age or older, declared disabled, or is the widowed spouse of a military veteran. **MUST SHOW PROOF**

**ALARM SYSTEM LOCATION INFORMATION:**

NAME (BUSINESS NAME OR RESIDENT NAME) Hidalgo County Health and Human Services

ALARM LOCATION ADDRESS 300 W. Hall Acres Suite B APT # \_\_\_\_\_

MAILING ADDRESS (If Different) \_\_\_\_\_

EMAIL ADDRESS rigoberto.hinojosa@hchd.org

**PERMIT HOLDER INFORMATION (PERSON/USER RESPONSIBLE FOR ALARM SYSTEM):**

NAME Valde Guerra DRIVER'S LICENSE # \_\_\_\_\_

RESIDENCE ADDRESS 281B S. Bus. Hwy 281 CITY Edinburg STATE Texas ZIP 78539

TITLE (Owner, Tenant, Manager, etc.) County Executive Officer

PHONE # HOME \_\_\_\_\_ PHONE # WORK (956) 821-7040 (Rigo Hinojosa)

**CONTACTS** - Please list two (2) Local emergency contacts, other than the intended permit holder or alarm company, that are willing and able to respond **WITHIN THIRTY (30) MINUTES** to grant access, secure property or deactivate the alarm system if the owner/occupant cannot be contacted.

NAME OF CONTACT #1: Rigo Hinojosa PHONE NUMBER: (956) 821-7040

NAME OF CONTACT #2: Eduardo Olivarez PHONE NUMBER: (956) 457-1772

**PERMIT TYPE: PERMIT STATUS:**

COMMERCIAL       NEW ALARM       RESIDENCE       RENEWAL

65 OVER, DECLARED DISABLED OR WIDOWED SPOUSE OF MILITARY VETERAN

**ALARM COMPANY NAME AND PHONE NUMBER:** Superior Alarm (956) 213-2070

**ALARM TYPE:**  Burglary       Hold-up/Robbery/Panic/Hostage       Other

**SUBMIT A SEPARATE PERMIT APPLICATION (AND FEE) FOR EACH SYSTEM.** PERMIT IS VALID FOR ONE YEAR FROM DATE OF ISSUE. I have carefully read the completed application and know the same is true and correct and hereby agree that if a permit is issued, I will comply with all provisions of Ordinance No. O-2014-26 of the City of Pharr and applicable state laws. I accept responsibility for payment of all fees and fines that may result from the operation of the alarm system described above.

**DATE/SIGNATURE** \_\_\_\_\_

Signature of Applicant/Permit Holder

**SEND COMPLETED/SIGNED APPLICATION AND CHECK TO:**

CITY OF PHARR  
C/O ALARMS DIVISION  
1900 S CAGE BLVD  
PHARR, TEXAS 78577

**USE ONLY OFFICE:** DATE RECEIVED: \_\_\_\_\_ PERMIT NUMBER: \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_\_



# Pharr

## Police Department



PHONE: 956-402-4700

Fax: 956 784-7839

MONDAY THROUGH FRIDAY 8 a.m. to 5 p.m.

CITY OF PHARR

ALARM PERMIT APPLICATION  
FOR ONE ALARM SYSTEM

PLEASE PRINT

**KEEP THIS FORM FOR YOUR RECORDS**

**PERMIT TERM:**

An Alarm Permit shall expire twelve (12) months from the date of issuance, and must be renewed annually by submitting an updated application and a registration renewal fee to the Alarm Administrator. The Alarm Administrator shall notify each Alarm User of the need to renew thirty (30) days prior to the expiration of the registration. It is the responsibility of the Alarm User to submit an application prior to the registration expiration date. Failure to renew will be classified as use of a non-registered Alarm System and may result in:

- (A) Non-response to Alarm Dispatch Requests;
- (B) The assessment of citations and penalties; and
- (C) A \$50.00 late fee may be assessed if the renewal is more than thirty (30) days late
- (A) An Alarm User shall be subject to fines, depending on the number of False Alarms within the previous 12-month period based upon the following schedule: (Ref. Local Government Code 214.196)

**# Of False Alarms Fine**

- 1 – 3 false alarms \$ 0
- 4 – 5 false alarms \$ 50.00 each
- 6 – 7 false alarms \$ 75.00 each
- 8 false alarms and above \$100.00 each

- (B) An Alarm User may be fined fifty (\$50.00) dollars for failure to provide a Responder when requested by Law Enforcement Authority.
- (C) An Alarm User may have the option of completing an Alarm User Awareness Class in lieu of paying one prescribed fine.
- (D) If Cancellation occurs prior to law enforcement arriving at the scene, this is not a False Alarm for the purpose of fines, and no fines will be assessed.
- (E) If law enforcement takes longer than thirty (30) minutes to respond to the Alarm Dispatch Request, this is not a False Alarm for the purpose of fines, and no fines will be assessed. (Ref. Local Government Code 214.196)

**PERMIT RENEWAL:**

- (A) No Alarm User shall operate, or cause to be operated, an Alarm System, which is intended to summons police response at its Alarm Site without a valid Alarm Permit. A separate Alarm Permit is required for each Alarm Site. **An Alarm Permit is not valid if it has been denied or revoked, has not been renewed, or has expired.**
- (B) The Alarm Site must have a valid Alarm Permit for the police department to respond to the location unless the Alarm Dispatch Request is for a Duress Alarm, Holdup Alarm or a Panic Alarm.
- (C) No Alarm User shall allow a Monitoring Company to make an Alarm Dispatch Request to an Alarm Site that does not have a valid Alarm Permit.
- (D) The fee for an Alarm Permit or an Alarm Permit renewal shall be determined from time to time by ordinance or resolution of the governing body, not to exceed \$50.00 for residential permits and \$100.00 for commercial permits. No refund of a registration or registration renewal fee will be made. The initial Alarm Permit fee must be submitted to the Alarm Administrator within five (5) days after the Alarm System installation or Alarm System Takeover and shall be paid by the Alarm User.

**EXEMPTIONS:**

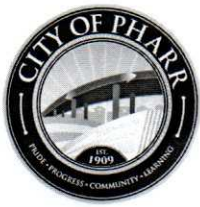
An alarm system on a residential premise occupied by a permit holder who is at least **sixty five (65) years of age or older; or is declared disabled**; or is the widowed spouse of a military veteran shall require a permit, but no permit application fee is required. **False alarm response fees do not qualify under this exemption.**

**REINSTATEMENT:**

A Person whose Alarm Permit has been revoked may, at the discretion of the Alarm Administrator or the Law Enforcement Authority, have the Alarm Permit reinstated by the Alarm Administrator or the Law Enforcement Authority if the Person:

- (A) Submits a new application and pays a fifty (\$50.00) dollar for residential and one hundred (\$100.00) dollar for commercial reinstatement fee;
- (B) Pays, or otherwise resolves, all outstanding citations and fines;
- (C) Submits a certification from an Alarm Installation Company, stating that the Alarm System has been repaired or adjusted in an attempt to eliminate False Alarms, and that the Alarm Permit holder has been made aware of behavioral issues that may cause False Alarms. This should include but is not limited to the effects of pets, home decorations, changes in the environment on security devices; as well as the need to train anyone that has access to the premises in the proper operation of the Alarm System; and to provide them with a code to arm/disarm the Alarm System and a password to identify themselves to the Monitoring Company in an alarm situation;
- (D) Submits a certification from an Alarm Installation Company per the requirements of Texas Occupations Code, Section 1702.286 pertaining to the Alarm Company providing the Alarm User information on:
  - (1) The law relating to False Alarms, including potential penalties and the revocation or suspension of an Alarm Permit;
  - (2) How to prevent false alarms; and
  - (3) How to properly operate the alarm system
- (E) Attends an Alarm User Awareness Class developed by the Alarm Administrator.

**NOTE: TO BETTER SERVE YOU, PLEASE PROVIDE A LETTER OF TERMINATION/CANCELLATION FROM YOUR ALARM CO. IF YOU DO NOT RENEW/CANCEL YOUR ACCOUNT WITH THEM.**



# Pharr

Police Department



## ALARMS DIVISION

### Invoice

<b>Bill To</b>
HIDALGO COUNTY HEALTH DEPARTMENT 300 W HALL ACRES RD STE B PHARR, TEXAS 78577 PERMIT # 5064

<b>Date</b>	<b>Invoice #</b>
6/24/2021	20869

Description	Amount
<p>RENEWAL FOR JULY 2021.</p> <p>PLEASE NOTE THAT IF PAYMENT IS NOT RECEIVED BY AUGUST 6, 2021 THERE WILL BE AN ADDITIONAL \$50.00 FEE ADDED TO YOUR ACCOUNT. THIS IS A CITY ORDINANCE.</p> <p>IF YOU NO LONGER HAVE AN ALARM SYSTEM, PLEASE SEND LETTER OF CANCELLATION FROM ALARM COMPANY TO OUR OFFICE TO CLOSE ACCOUNT.</p> <p>RENOVACIÓN PARA: JULIO 2021</p> <p>Por favor tenga en cuenta que si el pago no se recibe para el 06 DE AGOSTO DEL 2021 habrá un recargo adicional de \$50 agregado a su cuenta. Esto es una ordenanza de la ciudad. SI YA NO TIENE UN SISTEMA DE ALARMA, POR FAVOR ENVIE UNA COPIA DE LA CARTA DE CANCELACIÓN DE LA COMPAÑIA DE ALARMA PARA CERRAR SU CUENTA.</p> <p>HAGA SU CHEQUE A: CITY OF PHARR ALARMS DIVISION 1900 S CAGE BLVD PHARR, TX 78577 SI TIENIE ALGUNA PREGUNTA, PORFAVOR DE CONTACTARME A: 956-402-4746 - CORREO ELECTRONICO: maria.aguilera@pd.pharr-tx.gov</p>	15.00
	<b>Total</b> \$15.00
	<b>Payments/Credits</b> \$0.00
PLEASE RETURN COMPLETED APPLICATION ALONG WITH PAYMENT.	<b>Balance Due</b> \$15.00