UNIFORM NOTICE OF A LOW VOLTAGE ALARM SYSTEM PROJECT

Owner's or Customer's Name _____

Owner's or Customer's Address _____

City _____ State _____ Zip _____

Phone Number _____

E-mail address _____

Contractor's Name _____

Contractor's Address _____

City _____ State _____ Zip _____

Phone Number _____ License #_____

Date Project completed _____ Permit label # _____

Scope of Work _____

_____

_____

Notice is hereby given that a low voltage alarm system project has been completed at the address specified above; I certify that all of the foregoing information is true and accurate.

_____

(Signature of Owner, Tenant, Contractor or Authorized Representative.)(Date)