



**RIVERSIDE POLICE DEPARTMENT**

**Alarm Enforcement Unit**

**False Alarm Appeal Form**

Please return the completed appeal form to:  
Riverside Police Department  
Alarm Enforcement Unit  
4102 Orange Street  
Riverside, CA 92501

Name \_\_\_\_\_

Alarm System Permit No. \_\_\_\_\_

Permitted Location Address \_\_\_\_\_

City of Riverside Invoice No. \_\_\_\_\_

Police Report Number (if applicable) \_\_\_\_\_

Reason for Appeal \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**\*\*\*Office Use Only\*\*\***

Appeal Approved

Appeal Denied  Comments \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Alarm Enforcement Unit Signature \_\_\_\_\_

Print Name \_\_\_\_\_

Date \_\_\_\_\_