
**The Department of the Arkansas State Police
Private Investigators, Private Security, and Alarm
Installation/Monitoring Section**

**Alarm Monitoring Company
Owner/Manager
(Rule 9.3)**

AFFIDAVIT

I, _____, do hereby state under oath that I have read and understand A.C.A. §§ 17-40-101, et seq. and the Rules of this department.

Applicant's Signature

Date

State of _____

§

County of _____

Subscribed and sworn to before me, a Notary Public, in and for the County and State aforesaid,
this the _____ day of _____ 20_____.

(Seal)

Notary Public