



STATE OF TENNESSEE  
DEPARTMENT OF COMMERCE AND INSURANCE  
DETECTION SERVICES LICENSING PROGRAM  
**ALARM SYSTEMS CONTRACTORS**  
500 JAMES ROBERTSON PARKWAY  
NASHVILLE, TENNESSEE 37243-1168  
615.741.9771 FAX: 615.532.2965  
<http://regboards.tn.gov>

**Change of Address Form**

**Please complete the following information (please type or print) and mail or fax to this office**

- Alarm Systems Contractor (Company Address Change)  
 Alarm Qualifying Agent (Home Address Change)  
 Alarm Employee Registration (Home Address Change)

Company/Individual Name \_\_\_\_\_  
Name of Company or Individual

License/Registration Number \_\_\_\_\_

Previous Address \_\_\_\_\_  
Suite #

City State Zip Code

**New Address** \_\_\_\_\_  
Suite #

City State Zip Code

Area Code & Phone Number \_\_\_\_\_

Area Code & Fax Number \_\_\_\_\_ Effective Date \_\_\_\_\_

Email Address: \_\_\_\_\_

\_\_\_\_\_  
Signature of Company Representative

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Signature of Licensee or Employee Registrant

\_\_\_\_\_  
Date Signed