

ALARMS CUSTOMER WEBSITE GUIDE

https://alarms.pbso.org

Click below to go directly to each section within this user guide. For any additional questions or to check jurisdiction with the Alarms Unit directly, please contact (561) 688-3695 or <u>alarms@pbso.org</u>.

- > APPLY FOR A NEW PERMIT
- VIEW AND PAY FEES OR FINES ASSESSED TO MY ACCOUNT
- > UPDATE PROFILE INFORMATION OR PASSWORD FOR AN EXISTING ACCOUNT
- VIEW GENERAL INFORMATION AND FEES
- VIEW THE COUNTY ORDINANCE REGARDING BURGLAR ALARMS
- VIEW BURGLAR ALARM FAQs

APPLY FOR A NEW PERMIT

- Go to <u>https://alarms.pbso.org</u>
- Click the Apply for New Permit button



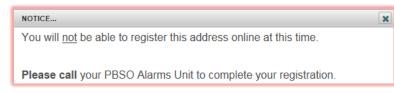
• Read the Terms and Conditions and click I Agree

I Agree

• Complete the Alarm Location Information section (fields in red are required)

| Alarm Location I | nformation * |
|-----------------------|---|
| | * refers to address where the alarm system is installed |
| Location Type | Select a location S |
| Last Name | |
| First Name | |
| Suite (if applicable) | Numbers and/or letters only (e.g. 'A2' or '5') |
| Street Number | Numbers only (0 - 9) |
| Street Name | |
| City | State Zip |
| Main Phone | 999-999-9999 |
| Other Phone | 999-999-9999 |
| Email address | Providing your email account authorizes the sending of future emails to you |
| | Required fields marked in RED |
| | |

o If you receive this notification, please contact the Alarm Unit at (561) 688-3695.



• Complete the Mailing/Billing Information section (fields in red are required)

| Mailing/Billing I | nformation * |
|-------------------|---|
| | * refers to the person / address where correspondence and statements will be mailed |
| Last Name | |
| First Name | |
| Street Number | |
| Street Name | |
| Suite | |
| City | State Zip |
| Home Phone | 999-999-9999 |
| Work Phone | 999-999-9999 |
| Cell Phone | 999-999-9999 |
| Other Phone | 999-999-9999 |
| Email Address | |
| | |
| | |
| | Required fields marked in RED |

- If this information is the same as the above section, check Use Alarmed Location Information
 Use Alarmed Location Information
- Complete the Contact/Keyholder Information section, if applicable

| Contact/Keyhol | der Information * |
|----------------|---|
| | * refers to person(s) to respond if called by law enforcement |
| Contact 1: | |
| Last Name | |
| First Name | |
| Home Phone | 999-999-9999 |
| Cell Phone | 999-999-9999 |
| | |
| Contact 2: | |
| Last Name | |
| First Name | |
| Home Phone | 999-999-9999 |
| Cell Phone | 999-999-9999 |

• Although it is recommended, you are not required to enter additional contact information

Complete the Alarm Company Information Section

| nformation * | |
|-----------------|--|
| | * refers to contracted Alarm Companie |
| | |
| I/A None - (-1) | ~ |
| I/A None - (-1) | |
| | nformation * I/A None - (-1) I/A None - (-1) |

 If your alarm was sold and is monitored by the same company, select the same company for both drop downs • Complete the Special Conditions section, if applicable



• List any special conditions, including, but not limited to: seniors in the building, pets, hazardous chemicals, weapons in the home, etc.

• Create a password

| Password * | |
|---|---|
| Enter and verify your password Enter Password | Password requirements Length between 8 and 15 characters And include One or more numeric (0-9) |
| Re-enter Password | One or more lower case (a-z) One or more UPPER Case (A-Z) One or more special characters ! @ # \$ % |

• The length of the password is between 8 and 15 characters and must include:

- One or more numeric (0-9)
- One or more lower case (a-z)
- One or more UPPPER Case (A-Z)
- One or more special characters ! @ # \$ %
- Click Submit Online Form

Submit Online Form

 You will receive a message prompting you to print a copy of the form for your records and Log In to make your first payment

 Return to Main screen
 Click here to Sign in...

 Thank you for registering online. Please print a copy of this form for your records and please note that your account is automatically placed on Hold until you Log In and make your first payment.

You will receive a confirmation e-mail with your permit #



Thank you for registering online.

Your Permit/Account Number is: 205391

NOTE: Your account is <u>not active</u> until you make your first payment, at which time you are responsible for supplying your alarm/monitoring company with your permit number.

VIEW AND PAY FEES OR FINES ASSESSED TO MY ACCOUNT

- Go to https://alarms.pbso.org
- Click the Pay Alarm Invoice button



• Enter your Account # and Password or related invoice # and click Submit

| \checkmark | Sign In to Your Account | |
|----------------|---------------------------------|--|
| Account # | | |
| [| | |
| Password (Case | SenSitiVe) or related invoice # | |
| | | |
| Submit | | |

- Your Account # is your permit #
 - Your Account # can be located on your returned application or invoice; if you do not know your Account #, please call the Alarms Unit at (561) 688-3695
- The password you created or any open invoice # can be entered in conjunction with your Account # to sign in
- You will see your account information with the Current Outstanding amount; click Pay Now Current Outstanding \$75.00 Pay Now
- Select which invoice(s) you would like to pay and click Continue Current Outstanding \$75.00

| Outstanding Invoices | | | | |
|----------------------|------------|---------|---------|-------------------------------------|
| Select | Invoice No | Charged | Owed | Letter |
| | | \$50.00 | \$50.00 | <false alarm="" summary=""></false> |
| | | \$25.00 | \$25.00 | Renewal |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

No more than 50 invoices can be selected for payment at a time Alarm and any related Collections invoices must be paid together

Continue

- o If you have multiple invoices, your account will not be satisfied until all invoices are paid
- You cannot partially pay on a single invoice
- You will be prompted that you will be redirected to the Forte Online Payment Portal; click Continue Forte Online Payment Portal

| In order to protect your online payment information, you will now be directed to the Forte online payment portal pages All payment information will be entered on that site which will appear in a new window for you. Successful payments made through the online portal will be reflected in your account within 24 hours. |
|---|
| Click the continue button when ready |

• The Billing Information will auto populate with information on your account; click Continue

| | | Florida | \checkmark |
|--------------------------------------|-----------------|---------|--------------|
| Billing Contact | Billing Address | | |
| Please enter your Information below. | | | |
| plining information | | | |

• You will see your Order and Transaction information and will have the ability to type any applicable comments; click Continue

Enter your payment information; click Continue

| our office at: 561- | 688-3695. | |
|---------------------|--|------------|
| | | |
| | Please fill in the green fields below | |
| | | |
| | putitive and setting and | |
| | Card Number* CVV* Card Holder Name* | |
| | Express 5 - May V 2016 V | |
| | 1 1 | |
| | | |
| | | |
| | | |
| | Single payment Payment Amount: 75. | .00 |
| | Payment Amount: 75. | .00 |

 You will have a chance to review all of the information entered; once confirmed to be accurate, check the authorization box and click Submit Payment
 Review & Submit

| I authorize my account to be charged in accordance to the follow | ing |
|--|-----|
| Terms and Conditions for the payment(s) indicated above. | |

SUBMIT PAYMENT

 To confirm payment was received, you will be immediately redirected to view the Current Outstanding amount and the last payment received Current Outstanding \$0.00

Latest Payment Processed: Invoice(s) Paid: 2249598,2281355 Payment Type: Online Amount Paid: \$75.00 Date Paid: 5/20/2016

UPDATE PROFILE INFORMATION OR PASSWORD FOR AN EXISTING ACCOUNT

- Go to <u>https://alarms.pbso.org</u>
- Click the Registered Alarm Users button



• Enter your Account # and Password or related invoice # and click Submit

| | Sign In to Your Account | |
|----------------|---------------------------------|--|
| Account # | | |
| [| | |
| Password (Case | SenSitiVe) or related invoice # | |
| | | |
| Submit | | |

- Your Account # is your permit #
 - Your Account # can be located on your returned application or invoice; if you do not know your Account #, please call the Alarms Unit at (561) 688-3695
- The password you created or any open invoice # can be entered in conjunction with your Account # to sign in
- To update your profile information, click Update User Information in the navigation pane Update User Information
 - Update information as necessary and click Submit

| Location Type | Residence | | | | |
|--------------------|-----------|-----------------|------------------|---|--|
| | | | | | |
| Name (Last, First) | | | | | |
| StrNum Street | | | |) | |
| Suite | |) | | | |
| City State Zip | (| | | | |
| Phone1 | | | | | |
| Phone2 | | | | | |
| email | | | | | |
| | | Required fields | indicated in RED | | |

- To update your password, click Change Password in the navigation pane Change Password
 - Enter your current and new passwords and click Submit

| | Reset Password |
|-----------------|---------------------------|
| Account # | |
| Current Passwor | d |
| | |
| New Password | New Password (Re-entered) |
| | |
| | |

- The length of the password is between 8 and 15 characters and must include:
 - One or more numeric (0-9)
 - One or more lower case (a-z)
 - One or more UPPPER Case (A-Z)
 - One or more special characters ! @ # \$ %

VIEW GENERAL INFORMATION AND FEES

Go to <u>http://www.pbso.org/index.cfm?fa=alarmunit&id=358</u>

VIEW THE COUNTY ORDINANCE REGARDING BURGLAR ALARMS

• Go to http://www.pbso.org/documents/alarmordinance.pdf

VIEW BURGLAR ALARM FAQs

• Go to http://www.pbso.org/index.cfm?fa=alarmunit&id=361